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PTSD Trajectory, Comorbidity, and Utilization of Mental Health Services among Reserves

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| 14. ABSTRACT This research will assess mental health and mental health service utilization over time among a representative sample of Reserve forces, within a multivariate causal framework taking into account life course experiences together with combat history, other military experience and civilian traumatic event experiences as determinants of mental health. We focus on the prevalence and correlates of PTSD and other mental illness and health service utilization, but also on the <i>trajectories</i> of PTSD and co-occurring psychopathology over time. The scope includes developing, piloting and implementing a structured survey for a random sample of Reserve members. Findings from analyses of all three waves of the survey will be disseminated to key stakeholders. To date, we have constructed a survey for initial data collection as well as subsequent waves that contains modules on (1) risk or protective factors for psychological morbidity over the life course (general traumas, psychological resources, life and family concerns), (2) mental health (depression, PTSD, emotional health history), (3) service utilization patterns (use of mental health resources). We have recently completed baseline enrollment and data collection on 1000 Reserves. We are currently planning the second wave of surveys and have initiated analysis of the data from the baseline survey. | | | | | |
| 15. SUBJECT TERMS Survey construction, random selection, survey pilot | | | | | |
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INTRODUCTION

This work will assess mental health and mental health service utilization over time among a representative sample of the Reserve forces, within a multivariate causal framework that takes into account life course experiences and circumstances together with combat history, other military experience (e.g. humanitarian activity and activation for state missions) and civilian traumatic event experiences as determinants of mental health in this group. We focus here not only on documenting the prevalence and correlates of PTSD and other mental illness and health service utilization among these forces, but also on documenting the *trajectories* of PTSD and co-occurring psychopathology over time among these forces. Although there is a growing literature about the mental health and mental health needs of active duty military personnel, this would be the first study, as best we know, that has focused explicitly on the experience of the Reserve forces. For the reasons mentioned above, this group needs to be identified as a separate study population so that the special issues associated with their service can be examined. This study has implications for early intervention after exposure to traumatic events (including combat experiences and domestic deployment), training of the RC, and education of commanding officers and military leadership.

BODY

STATEMENT OF WORK

Task 1. To develop a structured survey instrument that will assess (a) factors throughout the lifecourse that may be risk or protective factors for psychological morbidity among Reserve force members, (b) mental health, and (c) service utilization patterns among Reserve force members.

Milestone: The final version of the survey instrument has been developed and contains: (a) risk or protective factors for psychological morbidity over the life course (e.g. modules on general traumas, psychological resources, life and family concerns), (b) mental health (e.g. modules on depression, PTSD, emotional health history) (c) service utilization patterns among reserve force members (e.g. use of mental health resources). Please see Appendix 1 for a copy of the survey.

Task 2. To obtain final IRB approval from relevant local institutions (CU and USUHS) and Department of Defense.

Milestone: Final IRB approval was approved for the baseline survey from the original three institutions (UM, USUHS and DOD).

Task 3. To pilot test the instrument with a random sample of Reserve forces and modify the instrument as necessary to adequately reflect Reserve force experiences.

Milestone: The survey instrument has been piloted with a random sample of the Reserve forces and the instrument has been modified as necessary to adequately reflect Reserve force experience and shortened to reduce participant burden, and approved by DoD.

Task 4. To implement the survey among a randomly selected sample of 1,000 Reserve force members using a combination of telephone and web-based techniques.

Milestone: Participant population selected and baseline survey, N=1003 interviews completed.

Task 5. To analyze survey data and to produce reports that are accessible to military, civilian, and scientific audiences and to prepare first follow-up survey wave

Milestone: Data collection finished July 2010 and weights have been calculated to account for sampling of specific branches. We have begun preliminary analysis on the baseline data and will finalize analyses throughout the upcoming year.

Task 6. To implement the first survey follow-up, re-contacting all persons in the original sample and administering the follow-up survey using telephone and web-based methods.

Milestone: Continuing IRB approval has been obtained from the current institutions (CU and USUHS) and is in the final stages of approval at the Department of Defense. Approval will be met before initiating wave 2 data collection. See Appendix 2 for a copy of the first follow-up survey.

Task 7 – 9 not yet applicable

KEY RESEARCH ACCOMPLISHMENTS

- Baseline survey piloted and implemented
- 1000 Reservists enrolled and interviewed
- Preliminary analysis of baseline data collection begun
- Follow-up survey is currently being completed and will be piloted in November 2010 (please see appendix 2)

REPORTABLE OUTCOMES

None at this time

CONCLUSIONS

We completed the baseline data collection of the study in July 2010. This entailed completing and piloting the survey and enrolling and interviewing 1000 Reserve members. Preliminary data analysis has begun.

We are preparing the follow-up survey and will pilot the survey to 30 participants in the fall of 2010 and begin implementation of follow-up surveys in January 2011.

REFERENCES

None at this time

APPENDICES

1. QUESTIONNAIRE WAVE 1
2. QUESTIONNAIRE WAVE 2

Mental Health and Service Utilization among National Guard forces

Telephone Consent and Survey Questionnaire (Abt SRBI Project #4495)

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Mental Health and Service Utilization among National Guard forces

NOTE ON FORMATTING:

[TEXT] indicates a comment for *interviewers/coders* to see

[text] indicates words to stress

Interviewer: _____

TIME START: _____ TIME END: _____ DATE: _____

[CELL PHONE PROTOCOL TO BE INSERTED INTO CATI PROGRAM TO ENSURE SAFETY OF RESPONDENTS AND OFFER TO CALL ON A LANDLINE PHONE]

A. Introduction

May I speak to [NAME OF PARTICIPANT] Hello, my name is _____ and I am calling for University of Michigan and the Uniformed Services University of the Health Sciences. You should have received a letter regarding a research study that we are conducting, and I am calling to follow-up. As the letter explained, we are asking you to take part in a study about experiences of military personnel.

A1. First, are you currently at least 18 years old?

- 1 Yes [GO TO A3]
- 2 No [GO TO A2]
- 9 Refused [Go to B5]

A2. In order to participate in this study, you must be at least 18 years of age. Please tell me when you will be turning 18 and we will call you back then to schedule an interview.

- 1 Yes, okay [Schedule call back for date after birth date given]
- 9 Refused [Go to B5]

A3. Is this a good time for you to talk or would you like to make an appointment for a more convenient time?

- 1 Continue
- 2 Make Appointment
- 3 Do not wish to participate **[Go to B5]**

During this conversation I will give you important contact information that was also provided in the letter you received earlier. Please make sure that you have a way to record this information.

A4. Are you ready to continue or do you need a moment to get ready?

- 1 Continue
- 2 Need to get ready [Wait until ready]
- 3 Do not wish to participate **[Go to B5]**

B. Participation

[Overview of Verbal Consent Procedure]:

In the letter we mailed to you, we included a document that explained the purpose of the study, the procedures of the study and contact information. At this time I am going to review that information and make sure you understand the purpose of the study, what will be asked of you if you participate and make sure that you would like to participate.

[Purpose of the study]

The title of the study is "Health and Well-being of National Guard Forces". The study has two purposes – first, it will give us an idea about how certain experiences may affect the health of National Guard Members over time, and second it may help improve the treatment available National Guard members who may have stressful experiences while serving. The principal investigators of this study are Dr Sandro Galea at the University of Michigan and Dr Robert Ursano at the Uniformed Services University of the Health Sciences. The project is sponsored by the National Institutes of Health and the Department of Defense.

[Procedure]

We will be interviewing approximately 2,000 randomly selected National Guard members every year for 4 years. If you choose to participate in the interview today we will collect information about your family history, military history, medical history, quality of life, productivity, and your use of healthcare services. You may decline to answer any questions that you do not want to answer and you can discontinue the interview at any time if you choose to. This survey takes about 40 minutes to complete over the telephone. Agreeing to participate in the study and allowing your health information to be used is voluntary and is separate from your enlistment.

[Risks]

There are no known physical risks to you for participating in this study. Psychological or emotional risks are minimal in that some of the study questions are of a sensitive nature and may make you feel uncomfortable, though we have tried to make the process as comfortable as possible. If you feel distressed during the interview, you may stop. If you feel distress and would like to speak with someone at any point during the interview we will provide you with a phone number for a health provider on call.

[Benefits]

This study does not provide direct benefits to participants. If this work is successful in identifying features of deployment that are associated with better long-term mental health among military personnel, it is possible that subsequent changes in military practice will have benefits for you after a period of time and this study may one day help improve the health care of military personnel.

[Alternate Procedures]

As this is not a clinical or experimental study the only alternative to participation is to not participate.

[Cost]

There is no financial cost for you to participate in this study. We are offering \$25.00 for each interview completed. There will be 4 annual interviews so if you complete all of them you can earn \$100.00. We will also send \$10.00 in a mailing once a year between each of the interviews, for a total of an additional \$30.00 or \$130.00 all together for people who remain in the study all 4 years. Payment will be mailed to an address you supply at the completion of your interview

[Confidentiality]

Your participation in this study is confidential. The answers to your interviews will be kept separate from your identifying information and only one file will be kept that links your answers to your identifying information. You will not be identified in any reports on this study. Records will be kept confidential to the extent provided by federal, state and local law. However, the Institutional Review Boards at the University of Michigan and of the Uniformed Services University of the Health Sciences, the sponsor of the study, and government officials responsible for monitoring this study may inspect the reports. USAMRMC are eligible to review research records to ensure the protection of human subjects. The data collected during this study may be kept for an unspecified period of time.

[Certificate of Confidentiality]

Additionally, a Certificate of Confidentiality has been obtained to help ensure the privacy of the data collected and your identity. With this Certificate, the investigators cannot be forced (for example by court subpoena) to disclose information that may identify you in any federal, state, or local civil, criminal, administrative, legislative, or other proceedings. However, the US government may wish to audit the information collected in this study to evaluate the research practices of the study. In addition, if the study staff suspects intent to harm yourself or others we will report it to the proper authorities as necessary, but we would only disclose information in your records relevant to the prevention of serious harm to the person or persons endangered.

You can choose to quit at anytime by refusing to participate in the interviews. If you complete this interview and you decide you would like to permanently be removed from the study, you may contact SRBI by email (RNGStudy@srbi.com), phone (1-888-735-0199) or send a written letter mailed to: SRBI, Inc.. Attn: National Guard Study #4495, 275 Seventh Avenue, Suite 2700, New York, New York 10001. If we are unable to reach you for an extended period of time we may have to discontinue your participation in the study.

[Contact]

You may contact the Principal Investigator at any time with any questions. He is Dr Sandro Galea and can be reached 734-763-9784.

Further information with respect to illness or injury resulting from a research procedure as well as a research subjects' rights is available from the University of Michigan Institutional Review Board at 734-936-0933 or irbhsbs@umich.edu.

[ASK ALL]

B1. Do you have any questions?

1 Yes, I have some questions [GO TO B2]

2 No questions [GO TO B2a]

3 No, call back at another time [ARRANGE CALLBACK]

4 I do not wish to participate [Go to B5]

B2. What questions do you have?

- | | | |
|---|--|-------------------------------------|
| 1 | Questions answered, ready to proceed | [GO TO B2a] |
| 2 | Not willing to participate until contact investigator | [ARRANGE CALLBACK IN 3 DAYS] |
| 3 | Not willing to participate until contact SRBI supervisor | [ARRANGE CALLBACK] |
| 4 | Will do survey at another time | [ARRANGE CALLBACK] |
| 5 | Do not wish to participate | [Go to B5] |
| 6 | Not willing until receive a new copy of letter | [Go to B2c] |

B2c. I can have another copy of the letter sent to you. First let me verify that we have your current address.

This is the address that the letter was sent to: **[GO TO ADDRESS MODULE]**

Is this correct? **[CORRECT ADDRESS AS NEEDED]**

We will have a new copy of the letter sent to you and we'll get back to you in a few weeks.

[DISPO AS LETTER REMAIL – ARRANGE CALLBACK FOR 3 WEEKS FROM NOW]

B2a. To make sure that you understand the basic purpose of the study can you please tell me why we are doing this study?

- 1 Answer given **[RECORD TEXT BELOW AND READ B2b]**
- 2 Not sure/Don't know **[READ B2b]**
- 3 Refused **[READ B2b]**

B2b. (Just to be clear,) The study has two purposes – first, it will give us an idea about how certain experiences may impact National Guard Members over time, and second it may help improve the treatment available to members who may have stressful experiences while serving.

B3. Do you feel your questions have been adequately answered and that you fully understand the purpose of this research study? (Interviewer: please check “agrees” or “does not agree” corresponding to the participants answer)

- 1 Agree **[Ask B4]**
- 2 Does not agree **[Return to B2]**
- 3 Don't Know **[Return to B2]**
- 4 Refused **[Go to B5]**

B4. Do you agree to participate in this research study and begin study procedures as we have discussed?

- 1 Agree **[Go to Section C]**
- 2 Does not agree **[Go to B5]**
- 3 Don't Know **[Return to B2]**
- 4 Refused **[Go to B5]**

B5. Can you tell me why you don't wish to participate in the interview?

[THANK AND END]

[CELL PHONE PROTOCOL TO BE INSERTED INTO CATI PROGRAM TO ENSURE SAFETY OF RESPONDENTS AND OFFER TO CALL ON A LANDLINE PHONE]

[NOTE: THIS INFO ON FAQ SHEET FOR INTERVIEWERS]

Now, please take down the toll free number where you can call us back to complete the survey if we don't finish it all right now. We can be reached at (1-888-735-0199). Please mention the National Guard study and your survey key number – [KEY] when you call and you will be directed to the right person. As I mentioned before, this survey takes about one hour to complete. The questions are organized into sections that go together, so it works best if we can complete entire sections at one time. I will let you know periodically when we are between sections in case you need to take a break, but of course you can let me know that you need a break anytime you feel like it.

C. Military History

To begin with, I have some questions about your experience in the military.

C1a. Just to confirm, are you currently in a National Guard Component of the United States military, or are you separated or retired from the military altogether?

- 1 Currently in military National Guard Component **[CONTINUE]**
- 2 Not **[S/O NOT CURRENTLY ENROLLED – THANK & END]**

C1. How long have you been in the United States military, including both time on Active Duty and time in the National Guard s?

[NOTE: Include time in all branches of the military AND time in the National Guard s] [Round to the nearest whole year, <6 months=0; RANGE = 0-50]

- 1 _____[Years]
- 8 [VOL] Don't know
- 9 [VOL] Refused

C1c. Have you ever served as a soldier in another branch of the United States military OUTSIDE of your time in the National Guard ?

[IF ASKED: This does not include being active duty Army or Air Force while in the National Guard]

- 1 Yes [CONTINUE TO C1d]
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

[IF C1c IS "NO", "DON'T KNOW" OR "REFUSED" THEN SKIP TO QUESTION C1e]

C1d. Since you first entered the United States military and besides the National Guard or times you were active duty while in the National Guard , in what other service branches have you served? [MULTIPLE RECORD]

- 1 Air Force
- 2 Army
- 3 Coast Guard
- 4 Marine Corps
- 5 Navy
- 8 Other (SPECIFY)
- 98 [VOL] Don't know

99 [VOL] Refused

C1e. What age did you enter the National Guard ?

1 _____[Years]

8 [VOL] Don't know

9 [VOL] Refused

C2. In what service branch do you currently serve? [READ CHOICES IF NEEDED]

1 Air Force National Guard

2. Air National Guard

3 Army National Guard

4 Army National Guard

5 Coast Guard

4 Marine Corps National Guard

6 Navy National Guard

7 Other (SPECIFY)

8 [VOL] Don't know

9 [VOL] Refused

C3. What is your current Pay Grade? [READ CHOICES IF NEEDED]

1 E1

2 E2

3 E3

4 E4

5 E5

6 E6

7 E7

8 E8

9 E9

10 W1

11 W2

12 W3

13 W4

14 W5

15 O1

16 O2

17 O3

18 O4

19 O5

20 O6

21 O7 or above [THANK AND END SURVEY]

22 Other: [SPECIFY: _____]

88 [VOL] Don't know

99 [VOL] Refused

C6A1. Please tell me your current MOS (Military Occupational Specialties) number and just a brief description of that role? **[ALLOW MULTIPLE RESPONSES]**

- 1 _____
8 [VOL] Don't know
9 [VOL] Refused

[IF ANSWERED "DON'T KNOW" TO C6A1, GO TO C6A2; OTHERWISE GO TO C6b]

C6A2. Which category best fits your MOS? [READ LIST AS NECESSARY; ALLOW MULTIPLE RESPONSES]

- 1 Personnel and Administration
- 2 Intelligence
- 3 Infantry
- 4 Logistics
- 5 Marine Air Ground Task Force (MAGTF) Plans
- 6 Communications
- 8 Field Artillery
- 11 Utilities
- 13 Engineer, Construction, Facilities and Equipment
- 18 Tank and Assault Amphibious Vehicle
- 21 Ground Ordnance Maintenance
- 23 Ammunition and Explosive Ordnance Disposal
- 25 Operational Communications
- 26 Signals Intelligence/Ground Electronic Warfare
- 27 Linguist (Officer/Enlisted)
- 28 Ground Electronics Maintenance
- 30 Supply Administration and Operations
- 31 Traffic Management
- 33 Food Service
- 34 Financial Management
- 35 Major Transport
- 40 Data Systems
- 41 Marine Corps Exchange
- 43 Public Affairs
- 44 Legal Services
- 46 Visual Information
- 55 Music
- 57 Nuclear, Biological and Chemical Defense
- 58 Military Police and Corrections
- 59 Electronics Maintenance
- 60 60/61/62 Aircraft Maintenance
- 63 63/64 Avionics
- 65 Aviation Ordnance
- 66 Aviation Logistics
- 68 Meteorological and Oceanographic (METOC) Services
- 70 Airfield Services
- 72 Air Control/Air Support/Anti-air Warfare/Air Traffic Control
- 73 Navigation Officer and Enlisted Flight Crews
- 75 Pilots/Naval Flight Officers
- 76 Navy Officer Designators (DES) and Billet Codes (NOBC)
- 77 Navy Enlisted Classification Codes (NEC's)

78 8000-9599 Category "B" MOS's
 79 9600-9699 Special Education Program
 80 9700-9999 Identifying MOS's and Reporting MOS's

97 Other [SPECIFY] _____
 98 [VOL] Don't know
 99 [VOL] Refused

C6B. Do you know if you are going to be deployed in the future (either schedule or location)? [NOTE: When we say deployment, we mean mobilization either nationally or internationally and in any capacity]

1 Yes
 2 No
 8 [VOL] Don't Know
 9 [VOL] Refused
 10 [VOL] Will never be deployed again (ex. Retiring)
[IF "YES" THEN GO TO C7, OTHERWISE SKIP TO C10]

C7. What month and year are you scheduled to be deployed?

1 ____/____
 M M Y Y Y Y [RANGE: 1940-CURRENT OR FUTURE YEAR - 2030]
 2 [VOL] Will never be deployed again (ex. Retiring)
 8 [VOL] Don't Know
 9 [VOL] Refused

C9. To which country will you be deployed? [DO NOT READ LIST]

1 Afghanistan
 2 Iraq
 3 Kuwait
 4 Saudi Arabia
 5 United States
 8 Other: [SPECIFY: _____]
 9 [VOL] Don't know
 10 [VOL] Refused

Now I am going to ask you questions about your deployment history. By deployment I mean any mobilization, both nationally and internationally and in any capacity.
 Please keep in mind that I will be asking many questions that are about experiences you may have had at any time in your life. It is important for the research that you think carefully before answering.

C10. How many times have you been deployed in the past, either in the National Guard or in any other military capacity?

1 _____ [RANGE 0-30]

98 [VOL] Don't know

99 [VOL] Refused

[IF ANSWER IS ZERO, DK or REF, GO TO C17]

C11. Now thinking about your **most recent** deployment....

In what country did you spend the most amount of time? [DO NOT READ LIST]

1 Afghanistan

2 Iraq

3 Kuwait

4 Saudi Arabia

5 United States

8 Other: [SPECIFY: _____]

9 [VOL] Don't know

10 [VOL] Refused

C11a. Was this deployment: [READ CHOICES]

1 With your regular unit -that is, with the unit you are assigned to and train with when in a National Guard status

2. As an I.M.A. (Individual Mobilization Augmentee)

3. As a "filler" to a unit other than the one you are normally assigned to

4 Or as something else? [Describe:_____]

8 [VOL] Don't know

9 [VOL] Refused

C12. On what date did you begin that deployment? [PROBE FOR MONTH AND YEAR]

1 ____/____/____ [RANGE: 1940-CURRENT YEAR]

M M Y Y Y Y

8 [VOL] Don't know

9 [VOL] Refused

C13. On what date did you finish that deployment? [PROBE FOR MONTH AND YEAR]

1 ____/____/____ [RANGE: 1940-CURRENT YEAR] [MUST BE LATER THAN C12]

M M Y Y Y Y

2 Deployment has not ended

8 [VOL] Don't know

9 [VOL] Refused

C14. What was your age when you began this most recent deployment?

____[age in years] range 17-80 [if response is over 60, verify]

8 [VOL] Don't Know

9 [VOL] Refused

C15. What was your MOS (Military Occupational Specialties) number and a brief description of that role during your most recent deployment? [ALLOW MULTIPLE RESPONSES]

1 _____

8 [VOL] Don't know

[IF ANSWERED "DON'T KNOW" TO C15, GO TO C16; OTHERWISE GO TO C17]

C16. Which category best fits your MOS? [READ LIST AS NECESSARY; **ALLOW MULTIPLE RESPONSES**]

- 1 Personnel and Administration
- 2 Intelligence
- 3 Infantry
- 4 Logistics
- 5 Marine Air Ground Task Force (MAGTF) Plans
- 6 Communications
- 8 Field Artillery
- 11 Utilities
- 13 Engineer, Construction, Facilities and Equipment
- 18 Tank and Assault Amphibious Vehicle
- 21 Ground Ordnance Maintenance
- 23 Ammunition and Explosive Ordnance Disposal
- 25 Operational Communications
- 26 Signals Intelligence/Ground Electronic Warfare
- 27 Linguist (Officer/Enlisted)
- 28 Ground Electronics Maintenance
- 30 Supply Administration and Operations
- 31 Traffic Management
- 33 Food Service
- 34 Financial Management
- 35 Major Transport
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- 41 Marine Corps Exchange
- 43 Public Affairs
- 44 Legal Services
- 46 Visual Information
- 55 Music
- 57 Nuclear, Biological and Chemical Defense
- 58 Military Police and Corrections
- 59 Electronics Maintenance
- 60 60/61/62 Aircraft Maintenance
- 63 63/64 Avionics
- 65 Aviation Ordnance
- 66 Aviation Logistics
- 68 Meteorological and Oceanographic (METOC) Services
- 70 Airfield Services
- 72 Air Control/Air Support/Anti-air Warfare/Air Traffic Control
- 73 Navigation Officer and Enlisted Flight Crews
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- 77 Navy Enlisted Classification Codes (NEC's)
- 78 8000-9599 Category "B" MOS's
- 79 9600-9699 Special Education Program
- 80 9700-9999 Identifying MOS's and Reporting MOS's

- 97 Other [SPECIFY] _____
- 98 [VOL] Don't know
- 99 [VOL] Refused

[READ ONLY IF NECESSARY]

C17. What is your gender? [If the respondent does not immediately say Male or Female: What sex do you consider yourself to be? [INTERVIEWER: DO NOT READ CHOICES]

- 1 Male
- 2 Female
- 3 Other [SPEC:_____]
- 9 [VOL] Refused

[IF ANSWERED 'ZERO', DK OR REF TO QUESTION C10, THEN SKIP TO SECTION E]

D. General Military Experience

I'm now going to continue asking you about your **most recent deployment**.

TRAINING AND DEPLOYMENT PREPARATION

I am going to read several statements about how well prepared you were by the military for your most recent deployment, and I'd like to know how much you agree or disagree with each statement. There are 5 answer choices you can use: strongly agree, somewhat agree, somewhat disagree, strongly disagree, or neither agree nor disagree.

The (first/next) statement is [STATEMENT]. Do you agree, disagree OR do you neither agree nor disagree (3)?

[IF AGREE: Do you agree strongly (5) or agree somewhat (4)?]

[IF DISAGREE: Do you disagree strongly (1) or disagree somewhat (2)?]

| (ROTATE) | Strongly disagree | Somewhat disagree | Neither agree nor disagree | Somewhat agree | Strongly agree | (VOL) DK | (VOL) RF |
|--|-------------------|-------------------|----------------------------|----------------|----------------|----------|----------|
| D1. I had all the supplies and equipment needed to get my job done. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| D2. The equipment I was given functioned the way it was supposed to. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| D3. I received adequate training on how to use my equipment. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| D6. I was accurately informed about what to expect from the enemy. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| D8. I was accurately informed of what daily life would be like during my deployment. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

UNIT SUPPORT

The next statement is about your relationships with other military personnel during your most recent deployment.

How much do you agree or disagree that: [STATEMENT].

Do you agree, disagree, OR do you neither agree nor disagree (3)?

[IF AGREE: Do you agree strongly (5) or agree somewhat (4)?]

[IF DISAGREE: Do you disagree strongly (1) or disagree somewhat (2)?]

| (ROTATE) | Strongly disagree | Somewhat disagree | Neither agree nor disagree | Somewhat agree | Strongly agree | (VOL) DK | (VOL) RF |
|--|-------------------|-------------------|----------------------------|----------------|----------------|----------|----------|
| D11. I felt a sense of camaraderie between myself and other soldiers in my unit. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

LIFE & FAMILY CONCERNS

The next statement refers to concerns you may have had related to your life and family back home during your **most recent deployment**.

While you were deployed, how concerned were you about [ITEM]? Would you say not at all, a little, moderately or a great deal?

| (ROTATE) | Not at all concerned | A little concerned | Moderately concerned | Concerned A great deal | (VOL) Not applicable | VOL DK | VOL RF |
|---|----------------------|--------------------|----------------------|------------------------|----------------------|--------|--------|
| D34. Harming your relationship with your spouse or significant other. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

COMBAT EXPERIENCES

The following statements are about combat experiences you may have had during your most recent deployment.

While deployed:

*D41a. Did you participate in active combat operations as a member of a combat unit?

1 Yes

2 No

8 [VOL] Don't know

9 [VOL] Refused

*D41b. Did you experience combat as a member of medical staff, helicopter crew or corpse detail?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

*D53d. Were you injured or wounded during your most recent deployment?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

D54. Next I'm going to read a list of reasons for injuries or accidents.

Please tell me which, if any, of them you experienced during your most recent deployment. [MULTIPLE RECORD FOR EACH "YES"]

- Being hit by shrapnel or a fragment
- Being hit by a bullet or receiving a gunshot wound
- A motor vehicle crash with a vehicle of any type, including a helicopter or airplane
- An explosion or blast, such as an I.E.D. (Improvised Explosive Device), R.P.G. (Rocket Propelled Grenade), Land mine, Grenade, etc.
- Being hit by a Blunt object
- A fall
- OR some other injury or accident [SPECIFY] _____
- None

[IF NONE, DK OR REF FOR D54, SKIP TO D57]

D54b. I recognize that these experiences may have occurred as a result of a single event or multiple events. How many separate events did you experience?

[1-20; 21=21+; 98=Not Sure; 99= Refused]

[IF D54b=1 GO TO D55]

[READ IF D54b>1 and <4]

Now I'd like to know more about these [# OF EVENTS FROM D54b] events **[CONTINUE TO D54c1]**.

[READ IF D54b>3]

Now I'd like to know more about some of these events. Let's start with the most serious one and then I will ask about 2 others[**CONTINUE TO D54c1**].

D54c1. Thinking about (the worst/the next worst) of these events, please briefly describe what happened so I know how to refer to it: [enter brief description of event]

[REPEAT D54c1 UNTIL OBTAINED BRIEF DESCRIPTION ALL D54A EVENTS (3 MAXIMUM), RANDOMLY PICK ONE D54c1 EVENT TO CONTINUE WITH]

D54c2. Now I am only going to ask more specifically about one event. During [D54c1 RANDOMLY PICKED EVENT DESCRIPTION], which of the following did you experience? [READ LIST; **MULTIPLE RECORD**]

[READ ALL ITEMS "YES" IN D54a]

- Being hit by shrapnel or a fragment
- Being hit by a bullet or receiving a gunshot wound
- A motor vehicle crash with a vehicle of any type, including a helicopter or airplane
- An explosion or blast, such as an I.E.D. (Improvised Explosive Device), R.P.G. (Rocket Propelled Grenade), Land mine, Grenade, etc.
- Being hit by a Blunt object
- A fall
- or some other injury or accident [SPECIFY] _____

D55. Now I am going to ask you about symptoms you may have experienced after this event.

a. When this event occurred, were you dazed, confused or "seeing stars"?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

b. Was there any period of time just before the event that you did not or do not remember?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

[IF YES]

D55d. How long was the period of time just before the event that you did not or do not remember? How many seconds, minutes or hours was this period? _____ **[ALLOW FOR ANSWER IN SECONDS, MINUTES, OR HOURS OR DAYS]**

D55c. Was there any period of time just after the event that you did not or do not remember?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

[IF YES]

.D55cf How long was the period of time just after the event that you did not or do not remember? How many seconds, minutes or hours was this period? _____ **[ALLOW FOR ANSWER IN SECONDS, MINUTES, OR HOURS OR DAYS]**

D55d. Did you or do you currently have problems remembering details about the event?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

D55e. Did anyone report that you have had trouble remembering details about the event?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

D55f. During or as a result of the event, did anyone report that you lost consciousness or “blacked out?”

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

D55g. And during or as a result of the event, do you remember losing consciousness or “blacking out”?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

[IF YES TO EITHER f OR g]

D55h. How many times did you lose consciousness during or as a result of this event? **[1-20; 21=NS; 22=Ref]**

D55i. And, thinking about all of the times when you lost consciousness during or as a result of this event, what is the LONGEST AMOUNT OF TIME during which you were unconscious? __SPECIFY IN SECONDS, MINUTES OR HOURS OR DAYS _____

D55j. During this event did you hit your head?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

D55k. During this event were you wearing a helmet?

- 1 Yes
- 2 No
- 3 [VOL] Only during part of the event
- 8 [VOL] Don't know
- 9 [VOL] Refused

[ASK IF D55k=1 OR 3]

D55l. What type of helmet were you wearing? [READ LIST]

- 1 Kevlar or ACH (Advanced Combat Helmet)
- 2 Sports Helmet
- 3 Motorcycle helmet
- 4 Other [Specify] _____
- 8 [VOL] Don't know
- 9 [VOL] Refused

D56. Since this event occurred, how often have you experienced the following? [READ ITEM & ANSWER CHOICES]

| | All of the time | Most of the time | Some of the time | A little of the time | Not at all | VOL Don't Know | VOL Refused |
|-----------------------------|-----------------|------------------|------------------|----------------------|------------|----------------|-------------|
| a. Headaches | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| b. Memory Problems | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| c. Nausea or Vomiting | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| d. Irritability | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| e. Ringing in the ears | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| f. Dizziness | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| g. Balance problems | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| h. Difficulty concentrating | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| i. Vision Problems | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

DEPLOYMENT CONCERNS

Next, I have an agree-disagree statement about how you felt during your most recent deployment. The statement is [STATEMENT].

Do you agree, disagree, OR do you neither agree nor disagree (3)?

[IF AGREE: Do you agree strongly (5) or agree somewhat (4)?]

[IF DISAGREE: Do you disagree strongly (1) or disagree somewhat (2)?]

| (ROTATE) | Strongly disagree | Some-what disagree | Neither agree nor disagree | Some what agree | Strongly agree | VOL DK | VOL RF | VOL N/A |
|---------------------------------------|-------------------|--------------------|----------------------------|-----------------|----------------|--------|--------|---------|
| D88. I thought I would never survive. | 1 | 2 | 3 | 4 | 5 | 8 | 9 | 10 |

POST-DEPLOYMENT SUPPORT

We have completed the questions about your most recent deployment. The next set of statements refers to questions that are about the social support you had after your most recent deployment.

The (first/next) is [STATEMENT]. Do you agree, disagree, OR do you neither agree nor disagree (3)?

[IF AGREE: Do you agree strongly (5) or agree somewhat (4)?]

[IF DISAGREE: Do you disagree strongly (1) or disagree somewhat (2)?]

| (ROTATE) | Strongly disagree | Somewhat disagree | Neither agree nor disagree | Somewhat agree | Strongly agree | (VOL) DK | (VOL) RF |
|--|-------------------|-------------------|----------------------------|----------------|----------------|----------|----------|
| D109. The reception I received when I returned | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| from my deployment made me feel appreciated for my efforts. | | | | | | | |
| D110. The American people made me feel at home when I returned. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| D111. When I returned, people made me feel proud to have served my country in the Armed Forces. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| D113. People at home just don't understand what I have been through while in the Armed Forces. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| D114. There are people to whom I can talk about my deployment experiences. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| D115. The people I work with respect the fact that I am a veteran. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

E. Health History

E1. Turning to your health, in general, would you say your health is: [READ CHOICES]

- 1 Excellent
- 2 Very good
- 3 Good
- 4 Fair
- 5 Poor
- 8 [VOL] Don't know
- 9 [VOL] Refused

G. Psychosocial Resources

These next statements refer to social support you have felt you received in the **past 12 months** and I'd like to know how much you agree or disagree with each statement.

The (first/next) is [STATEMENT]. Do you agree, disagree, OR do you neither agree nor disagree (3)?

[IF AGREE: Do you agree strongly (5) or agree somewhat (4)?]

[IF DISAGREE: Do you disagree strongly (1) or disagree somewhat (2)?]

| ROTATE | Strongly disagree | Somewhat disagree | Neither agree nor disagree | Somewhat agree | Strongly agree | (VOL) DK | (VOL) RF |
|---|-------------------|-------------------|----------------------------|----------------|----------------|----------|----------|
| G1. I am carefully listened to and understood by family members or friends. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

| | | | | | | | |
|--|---|---|---|---|---|---|---|
| G2. Among my friends or relatives, there is someone who makes me feel better when I am feeling down. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| G3. I have problems that I can't discuss with family or friends. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| G4. Among my friends or relatives, there is someone I go to when I need good advice. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| G5. My friends or relatives would lend me money if I needed it. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| G6. My friends or relatives would help me move my belongings if I needed to. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| G7. The neighborhood where I currently live is a close-knit or unified neighborhood. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

H. General traumas

Next I am going to read a series of statements that refer to events you may have experienced at any time in **your lifetime**. It is important for the research that you think carefully before answering.

a) IN YOUR LIFETIME, have you...[READ EACH ITEM]

[IF C10>0, IMMEDIATELY ASK FOR ANY “YES”]

b) Was that related to your **most recent** military deployment? [YES, NO, BOTH (MORE THAN ONE INSTANCE), DK, REF]

| | a. In your lifetime, have you: | | | | (IF C10>0) b. Was that related to your most recent military deployment? | | |
|---|--------------------------------|----|----------|-----------|--|----|----------|
| DO NOT ROTATE | Yes | No | (Vol) DK | (Vol) Ref | Yes | No | Vol Both |
| *H1. Experienced combat or exposure to a war zone in the military or as a civilian | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| *H 2. Been in a fire or explosion | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 3. Been raped | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 4. Experienced another kind of sexual assault or unwanted sexual contact as a result of force, threat of harm, or manipulation | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 5. Been shot or stabbed | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 6. Been held captive, tortured, or kidnapped | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 7. Been mugged, held up, or threatened with a weapon | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 8. Been badly beaten up | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 9. Been in a serious transportation accident (for example a serious car or motor vehicle crash, boat accident, plane crash or train wreck). | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 10. Experienced any other kind of serious accident or injury | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 11. Experienced a natural disaster – for example, a fire, flood, earthquake – in which you were hurt or your property was damaged | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 12. Been diagnosed with a life-threatening illness | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 13. Had a child of yours diagnosed as having a life-threatening illness | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 14. Witnessed someone being killed or seriously injured | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 15. Unexpectedly discovered a dead body | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 16. Learned that a close friend or relative was raped or sexually assaulted | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 17. Learned that a close friend or relative was seriously physically attacked | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 18. Learned that a close friend or relative was seriously injured in a motor vehicle crash | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 19. Learned that a close friend or relative was | 1 | 2 | 8 | 9 | 1 | 2 | 3 |

| | | | | | | | |
|--|---|---|---|---|---|---|---|
| seriously injured in any other accident | | | | | | | |
| * H 20. Experienced the sudden, unexpected death of a close friend or relative | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 21. Caused serious injury, harm or death to someone else | | | | | | | |
| * H 22. Witnessed severe human suffering | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| H 23. Experienced mental illness personally or the mental illness of someone close to you | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| H 24. Had a parent who had a problem with drugs or alcohol | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| H 25. Had a family member other than a parent with a serious drug or alcohol problem | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| H 26. Been through a divorce or “break up” with a partner or significant other | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| H 27. Lost your job | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| H 28. Been emotionally mistreated – for example, shamed, embarrassed, ignored, or repeatedly told you were no good | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| H 29. Seen or heard physical fighting between your parents or caregivers, for example, grabbed, slapped, or had something thrown, kicked, bitten, hit with a fist, or hit with something hard, or threatened with, or hurt by, a knife or gun? | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| H 30. Experienced stressful legal problems – for example, being sued or suing someone else | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| H 31. Been unemployed and seeking employment for at least 3 months | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| H 32. Had serious financial problems | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| *H 33. Had a serious operation | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| H 34. Been Robbed or had your home broken into | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 35. Been exposed to toxic substances , for example, dangerous chemicals or radiation | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| H 36. Had problems getting access to adequate healthcare | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| *H 37. Experienced any other extraordinarily stressful situation or event | 1 | 2 | 8 | 9 | 1 | 2 | 3 |

CATI NOTE: IF RESPONDENT DOES NOT RECALL OR WILL NOT SAY WHAT THE OTHER STRESSFUL SITUATION OR EVENT WAS, DO NOT INCLUDE IN THE LIST OF TRAUMAS FOR FOLLOW-UP QUESTIONS.

[IF ‘YES’ TO H37]

H37a. Can you briefly describe what that was?

TRAUMA LIST FOR FOLLOW-UP QUESTIONS

- *1. Experienced combat or exposure to a war zone in the military or as a civilian
- *2. Been in a fire or explosion
- *3. Been raped
- *4. Experienced another kind of sexual assault or unwanted sexual contact as a result of force, threat of harm, or manipulation
- *5. Been shot or stabbed
- *6. Been held captive, tortured, or kidnapped
- *7. Been mugged, held up, or threatened with a weapon
- *8. Been badly beaten up
- *9. Been in a serious transportation accident (for example a serious car or motor vehicle crash, boat accident, plane crash or train wreck).
- *10. Experienced any other kind of serious accident or injury
- *11. Experienced a natural disaster – for example, a fire, flood, earthquake – in which you were hurt or your property was damaged
- *12. Been diagnosed with a life-threatening illness
- *13. Had a child of yours diagnosed as having a life-threatening illness
- *14. Witnessed someone being killed or seriously injured
- *15. Unexpectedly discovered a dead body
- *16. Learned that a close friend or relative was raped or sexually assaulted
- *17. Learned that a close friend or relative was seriously physically attacked
- *18. Learned that a close friend or relative was seriously injured in a motor vehicle crash
- *19. Learned that a close friend or relative was seriously injured in any other accident
- *20. Experienced the sudden, unexpected death of a close friend or relative
- *21. Caused serious injury, harm or death to someone else
- *22. Witnessed severe human suffering
- *33. Had a serious operation
- *35. Been exposed to toxic substances (like dangerous chemicals or radiation)
- *37. Experienced any other extraordinarily stressful situation or event

[CREATE COUNT OF *D ITEMS ANSWERED AFFIRMATIVELY (YES, OR ANY EXPOSURE). LIST AS POSSIBLE DEPLOYMENT-RELATED TRAUMAS IN J28 PER INSTRUCTIONS]

(IF *D41a=1) Experiencing combat as a member of a combat unit

(IF *D41b=1) Experiencing combat as a member of a medical team, helicopter crew or being on corpse detail

(IF *D53d=1) Being injured or wounded during most recent deployment

INSTRUCTIONS

IF ANY YES *H_a TRAUMA QUESTIONS, CREATE TWO LISTS: DEPLOYMENT RELATED TRAUMAS AND NON-DEPLOYMENT RELATED TRAUMAS. ITEMS ANSWERED 'BOTH' IN b SHOULD APPEAR IN BOTH LISTS.

CREATE TWO RANDOM SELECTIONS FROM EACH LIST FOR J1 NON-DEPLOYMENT AND J28 DEPLOYMENT RELATED

IF THERE ARE ZERO NON-DEPLOYMENT RELATED TRAUMAS, GO TO Q.J28

IF ONLY 1 NON-DEPLOYMENT RELATED TRAUMA, GO TO Q.J2

IF MORE THAN 1 NON-DEPLOYMENT RELATED TRAUMA, GO TO Q.J1

AFFIRMATIVE ANSWERS TO * D ITEMS SHOULD APPEAR IN THE DEPLOYMENT-RELATED TRAUMA LIST PER INSTRUCTIONS BELOW

J. Post-Traumatic Stress Disorder

Now, please consider the lifetime events we just discussed.

[IF THERE IS ONLY ONE NON-DEPLOYMENT RELATED TRAUMA, SELECT IT AND SKIP TO J2]

J1. Of the events we just discussed that were not deployment-related, which event would you consider the worst?

[*H1a- *H37a RANDOM PICK1], OR

[*H1a-H37a RANDOM PICK2], OR

one of the other non-deployment related events you experienced?

[PROBE: Would you like me to read the list of items you mentioned?]

1

98 [VOL] Don't know

99 [VOL] Refused

[LIST NON-DEPLOYMENT EVENTS ANSWERED 'YES' FROM *H1a-*H37a TRAUMA QUESTIONS]

[CATI: IF J1=DK/REF RANDOMLY SELECT A NON-DEPLOYMENT-RELATED EVENT ANSWERED 'YES' FROM *H1a-*H37A]

[CATI: DEFINE "WORST NON-DEPLOYMENT RELATED TRAUMA" AS ANSWER TO J1 OR SINGLE NON-DEPLOYMENT EVENT CODED FROM *H1a-*H37a TRAUMA QUESTIONS]

J2. During approximately what year did this event -- [WORST N-D TRAUMA] -- occur?

[PROBE: Your best estimate is fine.] [IF THERE WAS MORE THAN ONE OCCURRENCE OF THE EVENT, THEN PROBE: Thinking about the WORST time this happened, what year was it? IF THE EVENT WAS ONGOING, PROBE: Thinking about the WORST time during this period, what year was it?]

1

_____[4 DIGIT YEAR]

8 [VOL] Don't know

9 [VOL] Refused

[ASK IF YEAR REPORTED IN J2=STARTING YEAR OF MOST RECENT DEPLOYMENT IN C12]

J3. Was this before or after you left on your most recent deployment?

- 1 Before
- 2 After
- 3 (VOL) During
- 8 (VOL) Not sure
- 9 (VOL) Refused

Now I'm going to ask you about different thoughts and feelings you may have had because of this event --
[WORST N-D TRAUMA].

J4. When this event occurred, did you feel terrified?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

J5. When this event occurred, did you feel helpless?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

[CATI NOTE: Display the event at the top of each screen for reference]

Now I'm going to ask you about problems and complaints you may have had because of this event. Please tell me how much you were ever bothered by each of these problems in relation to this stressful experience.

| READ IN ORDER | Not at all | A little bit | Moderately | Quite a bit | Extremely | (VOL) DK | (VOL) RF |
|--|------------|--------------|------------|-------------|-----------|----------|----------|
| J6. How much were you ever bothered by: Repeated, disturbing memories, thoughts, or images of this stressful experience? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J7. How much were you ever bothered by: Repeated, disturbing dreams of this stressful experience? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J8. How much were you ever bothered by: Suddenly acting or feeling as if this stressful experience were happening again (as if you were reliving it)? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J9. How much were you ever bothered by: Feeling very upset when something reminded you of this stressful experience? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J10. How much were you ever bothered by: Having physical reactions such as heart pounding, trouble breathing, sweating when something reminded you of this stressful experience? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J11. How much were you ever bothered by: | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

| | | | | | | | |
|--|---|---|---|---|---|---|---|
| Avoiding thinking about or talking about this stressful experience or avoiding having feelings related to it? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | | | | | | | |
| J12. How much were you ever bothered by: Avoiding activities or situations because they reminded you of this stressful experience? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J13. How much were you ever bothered by: Trouble remembering important parts of this stressful experience? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J14. How much were you ever bothered by: Loss of interest in activities that you used to enjoy (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J15. How much were you ever bothered by: Feeling distant or cut off from other people? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J16. How much were you ever bothered by: Feeling emotionally numb or being unable to have loving feelings for those close to you? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J17. How much were you ever bothered by: Feeling as if your future will somehow be cut short? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J18. How much were you ever bothered by: | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Trouble falling or staying asleep? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | | | | | | | |
| J19. How much were you ever bothered by: Feeling irritable or having angry outbursts? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J20. How much were you ever bothered by: Having difficulty concentrating? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J21. How much were you ever bothered by: Being "super-alert" or watchful or on guard? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J22. How much were you ever bothered by: Feeling jumpy or easily startled? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

[IF ANY J6 – J22 > 1 EXCLUDING DON'T KNOW OR REFUSED, GO TO J23, OTHERWISE GO TO J28.]

J23. How difficult did these problems make it for you to do your work, take care of things at home, or get along with other people? Would you say READ CHOICES]?

- 1 Not difficult at all
- 2 Somewhat difficult
- 3 Very difficult
- 4 Extremely difficult
- 8 [VOL] Don't know
- 9 [VOL] Refused

J23a. When you had several of these bad moods, feelings, and memories, how distressing was it for you? Was it [READ CHOICES]?

- 1 Not at all distressing
- 2 Mildly distressing
- 3 Moderately distressing
- 4 Severely distressing
- 8 [VOL] Don't know
- 9 [VOL] Refused

[ASK J24 ONLY IF MORE THAN ONE QJ6-QJ22 ANSWERED 2-6, OTHERWISE GO TO J25]

J24. Did these experiences or feelings you've had ever seem to go together or happen at the same time?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

J25. How soon after this stressful experience did you start to have any of these problems you've mentioned?
[READ CHOICES IF NEEDED TO PROBE]

- 1 Same day
- 2 That week
- 3 Within 30 days
- 4 Within 6 months
- 5 Within 1 year
- 6 More than 1 year
- 8 [VOL] Don't know
- 9 [VOL] Refused

J26. What was the longest period of time during which you were having these problems? [READ CHOICES IF NEEDED TO PROBE]

- 1 Less than 1 month
- 2 Between 1 and 3 months
- 3 Between 3 and 6 months
- 4 Between 6 months and 1 year
- 5 More than 1 year
- 8 [VOL] Don't know
- 9 [VOL] Refused

J27. When was the most recent time that you had any of these problems as a result of this stressful experience? [READ CHOICES IF NEEDED TO PROBE]

- 1 Within the last week
- 2 Within the last 30 days
- 3 Over a month ago, but within the past 3 months,
- 4 Over 3 months ago, but within the past 6 months,
- 5 Over 6 months ago, but within the past 12 months,
- 6 More than 12 months ago
- 8 [VOL] Don't know
- 9 [VOL] Refused

CATI INSTRUCTIONS

IF NEVER DEPLOYED (C10=0), GO TO SECTION K
IF ANY DEPLOYMENT-RELATED EVENTS REPORTED IN *Hb1-*Hb37 or *D SERIES, ASK J28,
OTHERWISE ASK J29

DEPLOYMENT-RELATED PTSD

Now, please think about stressful experiences you have had in your lifetime that that were **deployment-related**.

[IF THERE IS ONLY ONE DEPLOYMENT- RELATED TRAUMA, SELECT IT AND SKIP TO INSTRUCTIONS AT J30]

J28. You mentioned that you experienced stressful events related to your most recent deployment such as
[*H1a-H37a RANDOM PICK1],OR
[*H1a-H37a RANDOM PICK2],

. [IF SUM(D*ITEMS)>0, READ: You also told us earlier that you experienced other events during your most recent deployment such as
[*D RANDOM PICK1], OR
[*D RANDOM PICK2]

Thinking about these deployment-related events we have already discussed or some other deployment-related event, which event would you consider the worst? [PROBE: Would you like me to read the list of items you mentioned?]

[CATI: SHOW ALL TRAUMAS IN THE LIST FROM *H1b-*H37b & *D ITEMS & *D ITEMS + OTHER]

1 _____
97 OR SOME OTHER EVENT RELATED TO YOUR MOST RECENT DEPLOYMENT? (SPECIFY)
98 [VOL] Don't know
99 [VOL] Refused

[CATI: IF J28 IS "DK" OR "REF" RANDOMLY SELECT TRAUMA FROM LIST OF DEPLOYMENT RELATED EVENTS FROM *H1b-*H37b & *D ITEMS – EXCLUDE "WORST NON-DEPLOYMENT RELATED TRAUMA" FROM THIS RANDOM SELECTION]

[ASK J29 ONLY IF NO DEPLOYMENT TRAUMAS FROM *H1b-*H37b AND *D ITEMS]

J29. Have you experienced any extraordinarily stressful events that were related to your most recent deployment that we have not asked you about?

1 Yes (SPECIFY)
2 No [SKIP TO NEXT SECTION]
98 (VOL) Not sure [SKIP TO NEXT SECTION]
99 (VOL) Refused [SKIP TO NEXT SECTION]

DEFINE "WORST DEP TRAUMA" AS ANSWER TO J28 or J29. IF "WORST DEP TRAUMA" IN J28 IS THE SAME AS "WORST NON-DEP TRAUMA", ASK J30 OTHERWISE SKIP TO J31:

J30. We just discussed your experiences and feelings about [WORST NON-DEP TRAUMA] as not being deployment-related. Was there a different time this occurred when it was related to your deployment, or are you referring to the same event as being the worst deployment-related experience you have had?

1 Different event **[CONTINUE]**

2 Same event **[IF J28>1 RE-ASK J28 BUT REMOVE WORST NON-DEP TRAUMA FROM LIST, OTHERWISE SKIP TO SECTION K]**

8 Not sure **[CONTINUE]**

9 Refused **[SKIP TO NEXT SECTION]**

J31. During approximately what year did event [WORST DEP TRAUMA] occur?
[PROBE: Your best estimate is fine.] [IF THERE WAS MORE THAN ONE OCCURRENCE OF THE EVENT, THEN PROBE: Thinking about the worst time this happened, what year was it?

1 _____[4 DIGIT YEAR]

8 [VOL] Don't know

9 [VOL] Refused

Now I'm going to ask you about different thoughts and feelings you may have had because of [WORST DEP TRAUMA].

J31a. When this event occurred, did you feel terrified?

1 Yes

2 No

8 [VOL] Don't know

9 [VOL] Refused

J31b. When this event occurred, did you feel helpless?

1 Yes

2 No

8 [VOL] Don't know

9 [VOL] Refused

[CATI NOTE: Display the event at the top of each screen for reference] Now I'm going to ask you about problems and complaints you may have had because of this event that was related to your deployment. Please tell me how much you were ever bothered by each of these problems in relation to this stressful experience.

| READ IN ORDER | Not at all | A little bit | Moderately | Quite a bit | Extremely | (VOL) DK | (VOL) RF |
|--|------------|--------------|------------|-------------|-----------|----------|----------|
| J32. How much were you ever bothered by: Repeated, disturbing memories, thoughts, or images of this stressful experience? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J33. How much were you ever bothered by: Repeated, disturbing dreams of this stressful experience? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J34. How much were you ever bothered by: Suddenly acting or feeling as if this stressful experience were happening again as if you were reliving it? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J35. How much were you ever bothered by: Feeling very upset when something reminded you of this stressful experience? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J36. How much were you ever bothered by: Having physical reactions, such as heart pounding, trouble breathing, sweating when something reminded you of this stressful experience? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J37. How much were you ever bothered by: Avoiding thinking about or talking about this stressful experience or avoiding having feelings related to | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

| | | | | | | | |
|--|---|---|---|---|---|---|---|
| it? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | | | | | | | |
| J38. How much were you ever bothered by: Avoiding activities or situations because they reminded you of this stressful experience? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J39. How much were you ever bothered by: Trouble remembering important parts of this stressful experience? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J40. How much were you ever bothered by: Loss of interest in activities that you used to enjoy? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J41. How much were you ever bothered by: Feeling distant or cut off from other people? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J42. How much were you ever bothered by: Feeling emotionally numb or being unable to have loving feelings for those close to you? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J43. How much were you ever bothered by: Feeling as if your future will somehow be cut short? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J44. How much were you ever bothered by: Trouble falling or staying asleep? (Would you say not at all, a little bit, | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| moderately, quite a bit, or extremely?) | | | | | | | |
| J45. How much were you ever bothered by: Feeling irritable or having angry outbursts? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J46. How much were you ever bothered by: Having difficulty concentrating? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J47. How much were you ever bothered by: Being "super-alert" or watchful or on guard? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J48. How much were you ever bothered by: Feeling jumpy or easily startled? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

[IF ANY OF QUESTIONS J32-J48 > 1 EXCLUDING DON'T KNOW OR REFUSED, GO TO J49; OTHERWISE GO TO NEXT SECTION.]

J49. How difficult did these problems make it for you to do your work, take care of things at home, or get along with other people? Would you say [READ CHOICES]?

- 1 Not difficult at all
- 2 Somewhat difficult
- 3 Very difficult
- 4 Extremely difficult
- 8 [VOL] Don't know
- 9 [VOL] Refused

J49a. When you had several of these bad moods, feelings, and memories, how distressing was it for you? Was it [READ CHOICES]?

- 1 Not at all distressing
- 2 Mildly distressing
- 3 Moderately distressing
- 4 Severely distressing
- 8 [VOL] Don't know
- 9 [VOL] Refused

[ASK J50 ONLY IF MORE THAN ONE QJ32-QJ48 ANSWERED 2-5 – ELSE GO TO J51]

J50. Did these experiences or feelings you've had ever seem to go together or happen at the same time?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

J51. How soon after this stressful experience did you start to have any of these problems you've mentioned?
[READ CHOICES IF NEEDED TO PROBE]

- 1 Same day
- 2 That week
- 3 Within 30 days
- 4 Within 6 months
- 5 Within 1 year
- 6 More than 1 year
- 8 [VOL] Don't know
- 9 [VOL] Refused

J52. What was the longest period of time during which you were having these problems? [READ CHOICES IF NEEDED TO PROBE]

- 1 Less than 1 month
- 2 Between 1 and 3 months
- 3 Between 3 and 6 months
- 4 Between 6 months and 1 year
- 5 More than 1 year
- 8 [VOL] Don't know
- 9 [VOL] Refused

J53. When was the most recent time you had any of these problems as a result of this stressful experience?
[READ CHOICES IF NEEDED TO PROBE]

- 1 Within the last week
- 2 Within the last 30 days
- 3 Over a month ago, but within the past 3 months,
- 4 Over 3 months ago, but within the past 6 months,
- 5 Over 6 months ago, but within the past 12 months,
- 6 More than 12 months ago
- 8 [VOL] Don't know
- 9 [VOL] Refused

K. Depression

The next questions are about ways you may have been feeling or may have behaved.

Ka. In your lifetime, did you ever have a period of at least two weeks during which you were bothered by [ITEM]?

Yes

No

(VOL) Don't know

(VOL) Refused

[IF 'YES' to a , ASK b and c]

b. When this occurred, were you bothered by this problem: [READ LIST]

c. Did this occur during the past 30 days, or not?

| | a. In your lifetime, did you ever have a period of at least two weeks during which you were bothered by | | b. When this occurred, were you bothered by this problem: [READ LIST] | | | | c. Did this occur during the past 30 days, or not? | |
|--|---|----|---|-------------------------|------------------|--------------|--|----|
| [DO NOT SHUFFLE ITEMS] | Yes | No | Several days | More than half the days | Nearly every day | (vol) DK/REF | Yes | No |
| K1. Little interest or pleasure in doing things. | 1 | 2 | 1 | 2 | 3 | 8/9 | 1 | 2 |
| K2. Feeling down, depressed, or hopeless | 1 | 2 | 1 | 2 | 3 | 8/9 | 1 | 2 |
| K3. Trouble falling or staying asleep, OR sleeping too much | 1 | 2 | 1 | 2 | 3 | 8/9 | 1 | 2 |
| K4. Feeling tired or having little energy | 1 | 2 | 1 | 2 | 3 | 8/9 | 1 | 2 |
| K5. Poor appetite OR overeating | 1 | 2 | 1 | 2 | 3 | 8/9 | 1 | 2 |
| K6. Feeling bad about yourself – or that you are a failure or have let yourself or your family down | 1 | 2 | 1 | 2 | 3 | 8/9 | 1 | 2 |
| K7. Trouble concentrating on things, such as reading the newspaper or watching television | 1 | 2 | 1 | 2 | 3 | 8/9 | 1 | 2 |
| K8. Moving or speaking so slowly that other people could have noticed? Or the opposite – being so fidgety or restless that you have been moving around a lot more than usual | 1 | 2 | 1 | 2 | 3 | 8/9 | 1 | 2 |
| K9. Thoughts that you would be better off dead or of hurting yourself in some way | 1 | 2 | 1 | 2 | 3 | 8/9 | 1 | 2 |

[IF 'YES' TO ANY QUESTIONS K1-K9 GO TO K10; OTHERWISE GO TO K14.]

K10. How difficult have these problems ever made it for you to do your work, take care of things at home, or get along with other people? Would you say [READ CHOICES]

[NOTE: READ ONLY IF NEEDED: "these problems" refers to problems that you mentioned being bothered by in just the past several questions which were about how you were feeling or may have behaved.]

- 1 Not difficult at all
- 2 Somewhat difficult
- 3 Very difficult
- 4 Extremely difficult
- 8 [VOL] Don't know
- 9 [VOL] Refused

[ASK IF MORE THAN 1 'YES' TO K1-K9 – ELSE SKIP TO K11a]

K11. Did these experiences or feelings you've had ever seem to go together or happen at the same time?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

K11a. What was the longest period of time during which you were having these problems? [READ CHOICES IF NEEDED TO PROBE]

- 1 Less than 1 month
- 2 Between 1 and 3 months
- 3 Between 3 and 6 months
- 4 Between 6 months and 1 year
- 5 More than 1 year
- 8 [VOL] Don't know
- 9 [VOL] Refused

K12. At what age did you first begin to have these problems?

_____ [AGE; RANGE 5-97] [98 = DON'T KNOW; 99 = REFUSE]

[IF K12 IS <13, PROBE:]

K12a When you say [ANSWER], is that how old you were at the time?

Yes [CONTINUE]

No [RETURN TO K12 FOR NEW RESPONSE]

[If ANSWER to K12 is same as ANSWER from C14 PLUS OR MINUS ONE YEAR go to K12b, otherwise go to K13]

K12b. Did this start before, after or during your most recent deployment?

- 1 Before
- 2 After
- 3 During
- 8 [VOL] Don't know
- 9 [VOL] Refused

K13. When was the most recent time that you had any of these problems? [READ CHOICES IF NEEDED TO PROBE]

- 1 Within the last week
- 2 Within the last 30 days
- 3 Over a month ago, but within the past 3 months,
- 4 Over 3 months ago, but within the past 6 months,
- 5 Over 6 months ago, but within the past 12 months,
- 6 More than 12 months ago
- 8 [VOL] Don't know
- 9 [VOL] Refused

[ASK ALL]

K14. Have you ever been diagnosed by a physician or health professional with...

a. Posttraumatic stress disorder (P.T.S.D.)

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

a1. [If C10>0] Was this before, since or both before and since your most recent deployment?

- 1 BEFORE
- 2 SINCE
- 3 BOTH
- 7 [VOL] During
- 8 [VOL] Don't know
- 9 [VOL] Refused

b. Depression

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

b1. [If C10>0] Was this before, since or both before and since your most recent deployment?

- 1 BEFORE
- 2 SINCE
- 3 BOTH
- 7 [VOL] During
- 8 [VOL] Don't know
- 9 [VOL] Refused

c. Anxiety Disorder

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

c1. [If C10>0] Was this before, since or both before and since your most recent deployment?

- 1 BEFORE
- 2 SINCE
- 3 BOTH
- 7 [VOL] During
- 8 [VOL] Don't know
- 9 [VOL] Refused

W. Risky Health Behaviors

Next, I am now going to ask about driving...

W1. How often do you use seat belts when you drive or ride in a car? Would you say: [READ CHOICES]

- 1 Always
- 2 Nearly always
- 3 Sometimes
- 4 Seldom
- 5 Never
- 6 [VOL] Never ride in a car
- 8 [VOL] Don't Know
- 9 [VOL] Refused

IF ANSWER TO W1 IS "NEVER RIDE IN A CAR" THEN SKIP TO W 7

W2. In the past 30 days, how many times have you driven when you've had perhaps too much to drink?

____ Number of times [0-30]

- 31 31+
- 98 [VOL] Don't Know
- 99 [VOL] Refused

M. Cigarette Use

Next, I have a few questions about cigarettes...

M1a. At any point in your life, did you smoke cigarettes on at least some days?

- 1 Yes **[ASK M1b]**
- 2 No **[SKIP TO NEXT SECTION]**
- 8 [VOL] Don't know **[SKIP TO NEXT SECTION]**
- 9 [VOL] Refused **[SKIP TO NEXT SECTION]**

M1b. At any point in your life, did you smoke cigarettes everyday?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

M1c. Thinking about just the past 30 days... Out of the past 30 days, how many days did you smoke cigarettes? Your best estimate is fine.

- 1 ____ Days used out of 30 **[0-30]**
- 98 [VOL] Don't Know
- 99 [VOL] Refused

[ASK IF M1c IS 1 OR GREATER]

M1d. In the past 30 days, on those days when you smoked, on average, how many cigarettes did you smoke per day? Your best estimate is fine and a pack = 20.

- 1 ___ ___ Cigarettes per day **[0-60]**
- 61 61 cigarettes or more
- 98 [VOL] Don't Know
- 99 [VOL] Refused

N. Alcohol

The next series of questions is about drinking alcohol beverages like beer, wine or liquor...

N1. At any point in your lifetime did you ever drink alcohol?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

[IF "YES", GO TO NEXT QUESTION; OTHERWISE GO TO NEXT SECTION.]

N19. Thinking about just the **past 30 days**, on how many days did you drink any alcoholic beverages? Your best estimate is fine.

- 1 ___ ___ Days used of out 30 **[0-30]**
- 98 [Vol] Don't Know
- 99 [Vol] Refuse

[IF N19 IS 1 DAYS OR GREATER, GO TO N20; OTHERWISE GO TO NEXT SECTION.]

N20. A drink is 1 can or bottle of beer, 1 glass of wine, 1 can or bottle of wine cooler, 1 cocktail, or 1 shot of liquor. On the days when you drank alcohol over the **past 30 days**, on average, how many drinks did you have each day? Your best estimate is fine.

- 1 ___ ___ Drinks per day **[0-19]**
- 20 20 drinks or more
- 98 [VOL] Don't Know
- 99 [VOL] Refused

R. Use of Mental Health Services

Now I'm going to ask you about your past use of services that help with problems with emotions or nerves, or problems with the use of alcohol or drugs.

R8g. Did you ever in your lifetime go to see any professionals or self-help groups such as a physician, psychiatrist, psychologist, minister, priest, rabbi or other spiritual advisor, Alcoholics Anonymous or Narcotics Anonymous for problems with your emotions or nerves, or for problems with your use of alcohol or drugs?

- 1 Yes
- 2 No
- 8 [VOL] Don't Know
- 9 [VOL] Refused

[ASK R10b If "YES" TO R8g AND C10>1]

R10b. Were any of these visits related to your most recent deployment?

- 1 Yes
- 2 No
- 8 [VOL] Don't Know
- 9 [VOL] Refused

[ASK R10c If "YES" IN R8g AND R10b="Yes"]

R10c. How soon did you seek help after your most recent deployment? [READ LIST IF NEEDED]

- 1 Within the week after
- 2 Within 30 days
- 3 Over a month, but within 3 months,
- 4 Over 3 months, but within 6 months,
- 5 Over 6 months, but within 12 months,
- 6 More than 12 months after
- 8 [VOL] Don't know
- 9 [VOL] Refused

[ASK R11 If "YES" TO ANY QUESTIONS IN R8]

R11. Were any of these services provided by the military, Tricare and/or the V.A. (Veterans' Administration)

[NOTE: This includes referrals to other locations which were made and covered by the military, Tricare or V.A.]?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

S. DEMOGRAPHICS

This series of questions is for statistical purposes only, to help us analyze the results of the study.

S1. First, please tell me your date of birth.

- 1 [INTERVIEWER: ENTER IN MM/DD/YYYY FORMAT. EX: JANUARY 2, 1965=01/02/1965]
[CATI: ALLOW FOR AGES 17 AND OLDER]

__ __ / __ __ / __ __ __ __
M M D D Y Y Y Y

- 9 [VOL] Refused [SKIP TO S1b]

S1a. So you are [xx] years old, correct?

- 1 Yes [GO TO S2]
2 No [GO BACK TO S1]
9 [VOL] Refused [GO TO S1b]

S1b. Can you just tell me into which of the following categories your age falls?

- 1 18 to 24
2 25 to 34
3 35 to 44
4 45 to 54
5 55 to 64
6 65 or older
9 [VOL] Refused

S2. What is your current marital status? Are you: [PLEASE READ EACH CHOICE EXCEPT FOR "DON'T KNOW" OR REFUSED; **MULTIPLE ANSWERS ALLOWED**]

- 1 Married [GO TO S3]
2 Divorced
3 Separated
4 Widowed
5 Never been married
8 [VOL] Don't know
9 [VOL] Refused [GO TO S3]

S2a. Are you currently in a committed relationship, dating casually, or not seeing anyone?

- 1 committed relationship
2 dating casually
3 not seeing anyone
4 [VOL] Other [SPEC: _____]
8 [VOL] Don't know
9 [VOL] Refused

S3. Are you the parent or primary caretaker of any children who are under 18 years of age (whether they live with you or not)?

- 1 Yes
2 No
8 [VOL] Don't know
9 [VOL] Refused

IF YES TO S3 go to S3b, OTHERWISE GO TO S4

S3b. How many of these children are living with you currently?

_____ NUMBER

[DO NOT INCLUDE A DON'T KNOW OR REFUSED CODE]

S4. What kind of health care coverage do you currently have to pay for your health care expenses? Are you covered by: [READ LIST AND SELECT ALL THAT APPLY]

1. Your civilian employer's healthcare plan
2. Your spouse or family member's civilian employer's plan
3. Your school's healthcare plan
4. Health insurance coverage you or your family pay for yourself
5. Medicare
6. Medicaid
7. Tri-care
8. Your spouse or family member's Tri-care, active duty or retired military healthcare coverage
9. the Veterans Administration (VA)
- 10 Some other kind of health care coverage [SPECIFY:_____]
- 11 or, do you have no health care insurance?
- 98 [VOL] Don't know
- 99 [VOL] Refused

S5. Are you of Spanish or Hispanic origin?

- 1 Yes
- 2 No **[GO TO S7]**
- 8 [VOL] Don't know **[GO TO S7]**
- 9 [VOL] Refused **[GO TO S7]**

S6. Specifically, what country did most of your Spanish or Hispanic family come from? [PROBE FOR A SINGLE ANSWER, **ALLOW ONLY ONE RESPONSE**]

- 1 Argentina
- 2 Bolivia
- 3 Brazil
- 4 Chile
- 5 Columbia
- 6 Costa Rica
- 7 Cuba
- 8 Dominican Republic
- 9 Ecuador
- 10 El Salvador
- 11 Guatemala
- 12 Honduras
- 13 Mexico
- 14 Nicaragua
- 15 Panama
- 16 Puerto Rico
- 17 Spain
- 18 Venezuela
- 19 Other [SPEC]

- 98 [VOL] Don't know
99 [VOL] Refused

S7. How would you describe your racial background? Would you describe yourself as:
[READ CHOICES] [IF MORE THAN ONE RACE CODE "OTHER, SPECIFY"]

- 1 Asian
2 Black or African American
3 American Indian or Alaska Native
4 Native Hawaiian or Other Pacific Islander
5 White
6 [VOL] Other [SPEC: _____]
7 [VOL] Hispanic
8 [VOL] Don't know
9 [VOL] Refused

S8. What is the highest level of education or schooling you have completed?
[READ CHOICES ONLY IF NEEDED]

- 1 Never attended school
2 Kindergarten to 8th grade
3 Some high school (9th to 11th grade)
4 High school equivalency (GED)
5 High school graduate (12th grade)
6 Technical training (not including military training)
7 Some college
8 College graduate (4-year)
9 Graduate work
10 Graduate degree
98 [VOL] Don't know
99 [VOL] Refused

S9. Do you rent your home or own your home? [IF "LIVING WITH FAMILY" PROBE: IS THE HOME YOU LIVE IN OWNED OR RENTED?]

- 1 Rent home
2 Own home (includes paying mortgage)
3 Neither
8 [VOL] Don't know
9 [VOL] Refused

S10. And now, what was your total household income last year from all sources before taxes? Include your income and income from anyone else living in your household. Do not tell me the amount. Please just tell me the answer that best represents your household income.

[IF HESITANT: Income data is important in analyzing health information we collect. For example, the information helps us learn whether people in one income group have particular difficulties accessing different services they might need.]

[F NECESSARY] Include income from jobs, investments, public assistance, unemployment insurance, social security, disability and pension funds, and all other sources?

Was it: [READ LETTER AND RANGE]

- 1 A, Less than or equal to \$40,000 [GO TO S10a]
2 B, More than \$40,000 to \$80,000 [GO TO S10b]

- 3 C, More than \$80,000 [GO TO S10c]
8 [VOL] Don't know [GO TO S13]
9 [VOL] Refused [GO TO S13]
[PROBE: Your best estimate is fine.]

S10a. Was that: [READ LETTER AND RANGE]

- 1 A, Less than or equal to \$20,000 or
2 B, More than \$20,000
8 [VOL] Don't know
9 [VOL] Refused

[GO TO S13]

S10b. Was that: [READ LETTER AND RANGE]

- 1 A, Less than or equal to \$60,000, or
2 B, More than \$60,000
8 [VOL] Don't know
9 [VOL] Refused

[GO TO S13]

S10c. Was that: [READ LETTER AND RANGE]

- 1 A, Less than or equal to \$100,000
2 B, More than \$100,000 to \$150,000, or
3 C, More than \$150,000
8 [VOL] Don't know
9 [VOL] Refused

S13a. Now I have some questions about your current work situation. For each choice, tell me whether or not it applies to you. **[SELECT ALL THAT APPLY]** Are you...

- 1 Working full-time in a civilian job
2 Working part-time in a civilian job
3 Working full-time for the National Guard
4 Working part time for the National Guard
5 Looking for work or unemployed
6 Retired
7 A homemaker
8 A student
9 On maternity or paternity leave
10 On illness or sick leave
11 On disability
12 Other (SPECIFY: _____)
98 [VOL] Don't know
99 [VOL] Refused

ASK S14 IF WORKING FULL TIME (1) OR PART TIME (2) IN A CIVILIAN JOB IN S13a]

S14. As an official part of your civilian job, do you supervise the work of other employees, that is have responsibility for, or tell other employees what to do?

- 1 Yes
2 No
8 [VOL] Don't know
9 [VOL] Refused

ASK S14a IF WORKING FULL TIME (3) OR PART TIME (4) FOR NATIONAL GUARD IN S13a]

S14a. As an official part of your job with the National Guard , do you supervise the work of other employees, that is have responsibility for, or tell other employees what to do?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

T. Counseling/Conclusion

T1. Thank you for completing the survey. Before I go, I have just a few more things to take care of, including getting some information so that we can send you the check for \$25 that we mentioned at the beginning of the survey. First, I would just like to give you our toll-free number in case you have any additional questions about the project or you need to get in touch with us later on.

T2. Would you like to write our number down? It is 1-888-735-0199.

- 1 Accepts number
- 2 Does not want the number

T2a. And, if you have any questions regarding your rights as a research participant, you may call the University of Michigan Institutional Review Board. Would you like to write the number down? That number is 734-936-0933.

- 1 Accepts number
- 2 Does not want the number

T3. Now, I just need to verify your name and address so that we can send you your check. [INTERVIEWER: IF RESPONDENT ASKS YOU TO SEND THE MONEY TO A CHARITY, SAY: That is a good idea, but the study protocol requires that I send the check to the person who completes the survey. Then, of course, you can send it along to whatever charity you prefer.]

- 1 Will give address/accept check **[GO TO ADDRESS MODULE]**
- 2 Decline address/decline check

[IF DECLINE CHECK]

T4. Then just let me verify your address. Having this information will make it easier to contact you in about a year to conduct the next follow-up interview or to send you information on the other parts of the study.

- 1 Will give address **[GO TO ADDRESS MODULE]**
- 2 Decline address

[ASK ALL]

T5. Email is a good way for us to keep in touch and inform you about our next upcoming survey. Do you have an email address?

YES, WILL GIVE EMAIL **[CAPTURE EMAIL ADDRESS]**
NO – DO NOT HAVE EMAIL
REFUSED TO GIVE EMAIL

T6. Having contact information for someone who always knows how to get in touch with you will also make it easier for us to keep in touch and inform you about our next upcoming survey. Is there someone who always knows how to get in touch with you?

Yes, will give information **[ask for first & last name & phone]**
No, no contacts **[SKIP TO T8]**
Refused **[SKIP TO T8]**

T7. Is there a second person who always knows how to get in touch with you?

Yes, will give information **[ask for first & last name & phone]**
No, no contacts **[SKIP TO T8]**
Refused **[SKIP TO T8]**

Okay, we're almost done. I have just one more thing to take care of before I go.

T8. Some of the questions in this survey can be upsetting or stressful. Were any of the survey questions emotionally upsetting to you?

1 Yes **[ASK T9]**
2 No **[GO TO T10a]**

T9. Are you still feeling emotionally upset or are you okay now?

1 Still upset **[ASK T10]**
2 Feeling okay now **[GO TO T10a]**

T10. If you would like to talk to someone about how you are feeling, I can have someone call you. Would you like our on call counselor to call you?

1 Yes **[GO TO T11]**
2 No **[GO TO T10a]**

[IF K9c= "YES," READ T10a and ASK T10a – ELSE SKIP TO T16]

T10a. Earlier in the survey you mentioned having thoughts within the past 30 days that you would be better off dead or of hurting yourself in some way. If you would like to talk to someone about these thoughts, I can have someone call you. Would you like our on call counselor to call you?

1 Yes **[GO TO T11]**
2 No **[GO TO T16]**

T11. Do you need a counselor to get back to you (today/this evening) or can I have someone call you (tomorrow/Monday) during regular business hours?

1 Need someone to call today/tonight
2 Would like someone to call tomorrow/Monday

T12. What is your name?

T12fn. RECORD first name

T12ln. RECORD last name

T12ph. What number should we call you back on?

T12st. And, where do you live? I need to provide the counselor with your name, address, and telephone number to be sure we are able to reach you. This information will only be used by the counselor to contact you.

RECORD street name and number

T12town. RECORD town

T12state. RECORD state

T12zip. RECORD zip code

T12co. RECORD any interviewer comments

Okay, I will have someone get back to you soon.

[NOTE TO INTERVIEWER: IF RESPONDENT WANTS TO TALK TO A DOCTOR TODAY/TOMORROW/MONDAY, NOTIFY YOUR SUPERVISOR NOW!]

[CATI – DISPLAY A NOTIFICATION SCREEN TO PROMPT SUPERVISOR FOR ANY COUNSELING REQUESTS]

T16. As a final note, we want to remind you that we will be calling again to follow-up on how you are doing about once a year. If you change your telephone number or address in the meantime, you can let us know about it by calling the toll free number I provided earlier. This information will be provided in the envelope with your check.

[RECORD CODE 2 ONLY IF PERSON SAYS NOT TO CALL AGAIN]

1 Continue

2 [VOL] Does not want to be called again

Thank you for your participation in this survey. Have a great day/evening.

CELL PHONE PROTOCOL

Some respondents will supply a phone number in response to the advance letters and they may turn out to be cell phones.

Update phone number needs to be available on the tipresp menu, and updating needs to be enabled in the script where indicated in the following questions.

[CATI: ADD THESE QUESTIONS TO THE SCRIPT IMMEDIATELY AFTER THE RESPONDENT INTRODUCTION]

P1. Is this number that I called you on a cell phone?

(If asked why: I just want to offer to call you on a land-line phone, or at a time when you are not driving if this is a cell phone)

Yes (GO TO P2)

No (SKIP TO A)

REFUSAL - SOFT (SOFT REFUSAL - THANK & END)

REFUSAL - HARD (HARD REFUSAL - THANK & END)

P2. Is there a land line where you would prefer me to call to conduct the interview?

Yes (UPDATE PHONE TO LAND LINE & SCHEDULE CB)

No, continue on cell phone

REFUSAL – SOFT (SOFT REFUSAL - THANK & END)

REFUSAL - HARD (HARD REFUSAL - THANK & END)

P3. Are you currently driving, or someplace else where it IS NOT safe to talk on your cell phone?

YES/CALL ME LATER (SCHEDULE CALLBACK)

No, respondent can talk now

REFUSAL – SOFT (SOFT REFUSAL - THANK & END)

REFUSAL - HARD (HARD REFUSAL - THANK & END)

P4. Is now a good time to talk?

(INTERVIEWER: IF EVENINGS / WEEKENDS ARE BETTER BECAUSE RESPONDENT IS NOT CHARGED FOR CELL USAGE, SCHEDULE CALLBACK AND RECORD COMMENTS)

Yes, now is fine (CONTINUE TO A1a)

No, another time is better (SCHEDULE CALLBACK & record comments about best call times)

REFUSAL – SOFT (SOFT REFUSAL - THANK & END)

REFUSAL - HARD (HARD REFUSAL - THANK & END)

Mental Health and Service Utilization among Reserve forces

Telephone Consent and Survey Questionnaire (Abt SRBI Project #4495)

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[NOTES TO CATI PROGRAMMER: SET TIME STAMPS FOR EACH LETTERED SECTION

LABEL ALL VARIABLE NAMES STARTING WITH THE LETTER "W2" TO DISTINGUISH AS YEAR TWO]

Mental Health and Service Utilization among Reserve forces

NOTE ON FORMATTING:

[TEXT] indicates a comment for *interviewers/coders* to see

[text] indicates words to stress

Interviewer: _____

TIME START: _____ TIME END: _____ DATE: _____

[CELL PHONE PROTOCOL TO BE INSERTED INTO CATI PROGRAM TO ENSURE SAFETY OF RESPONDENTS AND OFFER TO CALL ON A LANDLINE PHONE]

A. Introduction

May I speak to [NAME OF PARTICIPANT] Hello, my name is _____ and I am calling for Columbia University and the Uniformed Services University of the Health Sciences. You should have received a letter regarding the next year of this study that we are conducting, and I am calling to follow-up. As the letter explained, we are asking you to take part in the next year of the study about experiences of military personnel.

A1. First, are you currently at least 18 years old?

- 1 Yes [GO TO A3]
- 2 No [GO TO A2]
- 9 Refused [Go to B5]

A2. In order to participate in this study, you must be at least 18 years of age. Please tell me when you will be turning 18 and we will call you back then to schedule an interview.

- 1 Yes, okay [Schedule call back for date after birth date given]
- 9 Refused [Go to B5]

A3. Is this a good time for you to talk or would you like to make an appointment for a more convenient time?

- 1 Continue
- 2 Make Appointment
- 3 Do not wish to participate **[Go to B5]**

During this conversation I will give you important contact information that was also provided in the letter you received earlier. Please make sure that you have a way to record this information.

A4. Are you ready to continue or do you need a moment to get ready?

- 1 Continue
- 2 Need to get ready [Wait until ready]
- 3 Do not wish to participate **[Go to B5]**

B. Participation

[Overview of Verbal Consent Procedure]:

In the letter we mailed to you, we included a document that explained the purpose of the study, the procedures of the study and contact information. At this time I am going to review that information and make sure you understand the purpose of the study, what will be asked of you if you participate and make sure that you would like to participate.

[Purpose of the study]

The title of the study is "Health and Well-being of Reserve Forces". The study has two purposes – first, it will give us an idea about how certain experiences may affect the health of Reserve Members over time, and second it may help improve the treatment available to Reserve members who may have stressful experiences while serving. The principal investigators of this study are Dr Sandro Galea at Columbia University, formerly at the University of Michigan, and Dr Robert Ursano at the Uniformed Services University of the Health Sciences. The project is sponsored by the National Institutes of Health and the Department of Defense.

[Procedure]

To better understand the experiences of the Reserve, we will be re-interviewing the members who participated in the baseline survey, every year for the next 3 years. If you choose to participate in the interview today we will collect information about your family history, military history, medical history, quality of life, productivity, and your use of healthcare services. You may decline to answer any questions that you do not want to answer and you can discontinue the interview at any time if you choose to. This survey takes about 40 minutes to complete over the telephone. Agreeing to participate in the study and allowing your health information to be used is voluntary and is separate from your enlistment.

[Risks]

There are no known physical risks to you for participating in this study. Psychological or emotional risks are minimal in that some of the study questions are of a sensitive nature and may make you feel uncomfortable, though we have tried to make the process as comfortable as possible. If you feel distressed during the interview, you may stop. If you feel distress and would like to speak with someone at any point during the interview we will provide you with a phone number for a health provider on call.

[Benefits]

This study does not provide direct benefits to participants. If this work is successful in identifying features of deployment that are associated with better long-term mental health among military personnel, it is possible that subsequent changes in military practice will have benefits for you after a period of time and this study may one day help improve the health care of military personnel.

[Alternate Procedures]

As this is not a clinical or experimental study the only alternative to participation is to not participate.

[Cost]

There is no financial cost for you to participate in this study. We are offering \$25.00 for each interview completed. There will be 3 more annual interviews so if you complete all of them you can earn \$100.00. We will also send \$10.00 in a mailing once a year between each of the interviews, for a total of an additional \$30.00 or \$130.00 all together for people who remain in the study all 4 years. Payment will be mailed to an address you supply at the completion of your interview

[Confidentiality]

Your participation in this study is confidential. The answers to your interviews will be kept separate from your identifying information and only one file will be kept that links your answers to your identifying information. You will not be identified in any reports on this study. Records will be kept confidential to the extent provided by federal, state and local law. However, the Institutional Review Boards at the Columbia University and of the Uniformed Services University of the Health Sciences, the sponsor of the study, and government officials responsible for monitoring this study may inspect the reports. USAMRMC are eligible to review research records to ensure the protection of human subjects. The data collected during this study may be kept for an unspecified period of time.

[Certificate of Confidentiality]

Additionally, a Certificate of Confidentiality has been obtained to help ensure the privacy of the data collected and your identity. With this Certificate, the investigators cannot be forced (for example by court subpoena) to disclose information that may identify you in any federal, state, or local civil, criminal, administrative, legislative, or other proceedings. However, the US government may wish to audit the information collected in this study to evaluate the research practices of the study. In addition, if the study staff suspects intent to harm yourself or others we will report it to the proper authorities as necessary, but we would only disclose information in your records relevant to the prevention of serious harm to the person or persons endangered.

You can choose to quit at anytime by refusing to participate in the interviews. If you complete this interview and you decide you would like to permanently be removed from the study, you may contact SRBI by email (RNGStudy@srbi.com), phone (1-888-735-0199) or send a written letter mailed to: SRBI, Inc.. Attn: Reserve and Study #4495, 275 Seventh Avenue, Suite 2700, New York, New York 10001. If we are unable to reach you for an extended period of time we may have to discontinue your participation in the study.

[Contact]

You may contact the Principal Investigator at any time with any questions. He is Dr Sandro Galea and can be reached 212 305 8755.

Further information with respect to illness or injury resulting from a research procedure as well as a research subjects' rights is available from the Columbia University Institutional Review Board at 212-305-5883. The address is 722 West 168th Street, 4th Floor, New York, NY 10032

[ASK ALL]

B1. Do you have any questions?

1 Yes, I have some questions [GO TO B2]

2 No questions [GO TO B2a]

3 No, call back at another time [ARRANGE CALLBACK]

4 I do not wish to participate [Go to B5]

B2. What questions do you have?

- | | | |
|---|--|-------------------------------------|
| 1 | Questions answered, ready to proceed | [GO TO B2a] |
| 2 | Not willing to participate until contact investigator | [ARRANGE CALLBACK IN 3 DAYS] |
| 3 | Not willing to participate until contact SRBI supervisor | [ARRANGE CALLBACK] |
| 4 | Will do survey at another time | [ARRANGE CALLBACK] |
| 5 | Do not wish to participate | [Go to B5] |
- a new copy of letter **[Go to B2c]**

B2c. I can have another copy of the letter sent to you. First let me verify that we have your current address.

This is the address that the letter was sent to: **[GO TO ADDRESS MODULE]**

Is this correct? **[CORRECT ADDRESS AS NEEDED]**

We will have a new copy of the letter sent to you and we'll get back to you in a few weeks.

[DISPO AS LETTER REMAIL – ARRANGE CALLBACK FOR 3 WEEKS FROM NOW]

B2a. To make sure that you understand the basic purpose of the study can you please tell me why we are doing this study?

- 1 Answer given **[RECORD TEXT BELOW AND READ B2b]**
 - 2 Not sure/Don't know **[READ B2b]**
 - 3 Refused **[READ B2b]**
-

B2b. (Just to be clear,) The study has two purposes – first, it will give us an idea about how certain experiences may impact Reserve Members over time, and second it may help improve the treatment available to members who may have stressful experiences while serving.

B3. Do you feel your questions have been adequately answered and that you fully understand the purpose of this research study? (Interviewer: please check “agrees” or “does not agree” corresponding to the participants answer)

- 1 Agree **[Ask B4]**
- 2 Does not agree **[Return to B2]**
- 3 Don't Know **[Return to B2]**
- 4 Refused **[Go to B5]**

B4. Do you agree to participate in this research study and begin study procedures as we have discussed?

- 1 Agree **[Go to Section C]**
- 2 Does not agree **[Go to B5]**
- 3 Don't Know **[Return to B2]**
- 4 Refused **[Go to B5]**

B5. Can you tell me why you don't wish to participate in the interview?

[THANK AND END]

[CELL PHONE PROTOCOL TO BE INSERTED INTO CATI PROGRAM TO ENSURE SAFETY OF RESPONDENTS AND OFFER TO CALL ON A LANDLINE PHONE]

[NOTE: THIS INFO ON FAQ SHEET FOR INTERVIEWERS]

Now, please take down the toll free number where you can call us back to complete the survey if we don't finish it all right now. We can be reached at (1-888-735-0199). Please mention the Reserve study and your survey key number – [KEY] when you call and you will be directed to the right person. As I mentioned before, this survey takes about one hour to complete. The questions are organized into sections that go together, so it works best if we can complete entire sections at one time. I will let you know periodically when we are between sections in case you need to take a break, but of course you can let me know that you need a break anytime you feel like it.

C. Military History

To begin with, I have some questions about your experience in the military.

C1a. Just to confirm, are you currently in the Reserve Component of the United States military, or are you separated or retired from the military altogether?

- 1 Currently in military Reserve Component **[CONTINUE]**
- 2 Not in the Reserves or retired **[CONTINUE]**

C1. How long have you been in the United States military, including both time on Active Duty and time in the Reserves?

[NOTE: Include time in all branches of the military AND time in the Reserves] [Round to the nearest whole year, <6 months=0; RANGE = 0-50]

- 1 _____[Years]
- 8 [VOL] Don't know
- 9 [VOL] Refused

C1c. Since we last spoke, have you ever served as a soldier in another branch of the United States military OUTSIDE of your time in the Reserve?

[IF ASKED: This does not include being active duty Army or Air Force while in the Reserve]

- 1 Yes [CONTINUE TO C1d]
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

[IF C1c IS "NO", "DON'T KNOW" OR "REFUSED" THEN SKIP TO QUESTION C1e]

C1d. Since you we last spoke and besides the Reserve or times you were active duty while in the Reserve, in what other service branches have you served? [MULTIPLE RECORD]

- 1 Air Force
- 2 Army
- 3 Coast Guard
- 4 Marine Corps
- 5 Navy
- 8 Other (SPECIFY)
- 98 [VOL] Don't know
- 99 [VOL] Refused

C2. In what service branch do you currently serve? [READ CHOICES IF NEEDED]

- 1 Air Force Reserve
- 2. Air National Guard
- 3 Army Reserve
- 4 Army National Guard
- 5 Coast Guard
- 4 Marine Corps Reserve
- 6 Navy Reserve
- 7 Other (SPECIFY)
- 8 [VOL] Don't know
- 9 [VOL] Refused

[C3 REVISED Based on DOD request for no rank information]

C3. What is your current Pay Grade? [READ CHOICES IF NEEDED]

- 1 E1
- 2 E2
- 3 E3
- 4 E4
- 5 E5
- 6 E6
- 7 E7
- 8 E8
- 9 E9
- 10 W1
- 11 W2
- 12 W3
- 13 W4
- 14 W5
- 15 O1
- 16 O2
- 17 O3
- 18 O4
- 19 O5
- 20 O6
- 21 O7 or above [THANK AND END SURVEY]
- 22 Other: [SPECIFY: _____]
- 88 [VOL] Don't know
- 99 [VOL] Refused

C6A1. Please tell me your current MOS (Military Occupational Specialties) number and just a brief description of that role? **[ALLOW MULTIPLE RESPONSES]**

- 1 _____
- 8 [VOL] Don't know
- 9 [VOL] Refused

[IF ANSWERED "DON'T KNOW" TO C6A1, GO TO C6A2; OTHERWISE GO TO C6b]

C6A2. Which category best fits your MOS? [READ LIST AS NECESSARY; ALLOW MULTIPLE RESPONSES]

- 1 Personnel and Administration
- 2 Intelligence
- 3 Infantry
- 4 Logistics
- 5 Marine Air Ground Task Force (MAGTF) Plans
- 6 Communications
- 8 Field Artillery
- 11 Utilities
- 13 Engineer, Construction, Facilities and Equipment
- 18 Tank and Assault Amphibious Vehicle
- 21 Ground Ordnance Maintenance
- 23 Ammunition and Explosive Ordnance Disposal
- 25 Operational Communications
- 26 Signals Intelligence/Ground Electronic Warfare
- 27 Linguist (Officer/Enlisted)
- 28 Ground Electronics Maintenance
- 30 Supply Administration and Operations
- 31 Traffic Management
- 33 Food Service
- 34 Financial Management
- 35 Major Transport
- 40 Data Systems
- 41 Marine Corps Exchange
- 43 Public Affairs
- 44 Legal Services
- 46 Visual Information
- 55 Music
- 57 Nuclear, Biological and Chemical Defense
- 58 Military Police and Corrections
- 59 Electronics Maintenance
- 60 60/61/62 Aircraft Maintenance
- 63 63/64 Avionics
- 65 Aviation Ordnance
- 66 Aviation Logistics
- 68 Meteorological and Oceanographic (METOC) Services
- 70 Airfield Services
- 72 Air Control/Air Support/Anti-air Warfare/Air Traffic Control
- 73 Navigation Officer and Enlisted Flight Crews
- 75 Pilots/Naval Flight Officers
- 76 Navy Officer Designators (DES) and Billet Codes (NOBC)
- 77 Navy Enlisted Classification Codes (NEC's)
- 78 8000-9599 Category "B" MOS's
- 79 9600-9699 Special Education Program
- 80 9700-9999 Identifying MOS's and Reporting MOS's

- 97 Other [SPECIFY] _____

- 98 [VOL] Don't know
99 [VOL] Refused

C6B. Do you know if you are going to be deployed in the future (either schedule or location)? [NOTE: When we say deployment, we mean mobilization either nationally or internationally and in any capacity]

- 1 Yes
2 No
8 [VOL] Don't Know
9 [VOL] Refused
10 [VOL] Will never be deployed again (ex. Retiring)
[IF "YES" THEN GO TO C7, OTHERWISE SKIP TO C10]

C7. What month and year are you scheduled to be deployed?

- 1 ___/___/___
 M M Y Y Y Y [RANGE: 1940-CURRENT OR FUTURE YEAR - 2030]
2 [VOL] Will never be deployed again (ex. Retiring)
8 [VOL] Don't Know
9 [VOL] Refused

C9. To which country will you be deployed? [DO NOT READ LIST]

- 1 Afghanistan
2 Iraq
3 Kuwait
4 Saudi Arabia
5 United States
8 Other: [SPECIFY: _____]
9 [VOL] Don't know
10 [VOL] Refused

Now I am going to ask you questions about your deployment history. By deployment I mean any mobilization, both nationally and internationally and in any capacity.

Please keep in mind that I will be asking many questions that are about experiences you may have had at any time in your life. It is important for the research that you think carefully before answering.

C10. How many times have you been deployed in the past, either in the Reserve or in any other military capacity?

- 1 _____ [RANGE 0-30] [IF ANSWER IS ZERO, DK or REF, GO TO C17]
98 [VOL] Don't know
99 [VOL] Refused

(For each of the deployments ask C10a – C10e)

[CATI: there is no cap on iterations could be up to max deployment range of 30]

C10a. In what year did this deployment end?

1 [RANGE: 1940 – CURRENT YEAR]

9998 [VOL] Don't Know

9999 [VOL] Refused

C10c. Were you deployed to a combat setting?

1 Yes

2 No

8 [VOL] Don't Know

9 [VOL] Refused

Now thinking about your (second/third/fourth, etc.) deployment....

[REPEAT C10a and C10c for all deployments]

[NOTE: IF LAST DEPLOYMENT ENDED PRIOR TO 2010, SKIP TO C17]

Now, thinking about your most recent deployment in 2010,

C10g. Did that deployment happen since we last spoke in [MONTH] of [YEAR]?

1 Yes

2 No

8 [VOL] Don't Know

9 [VOL] Refused

(If C10g = "Yes" then go to C11a, otherwise skip to C17)

[DUMMY VARIABLE NAMED C10gFLG ADDED:

IF C10g = "Yes", C10gFLG = "1. DEPLOYED SINCE LAST SURVEY;

IF C10g = "No", "Don't Know", "Refused" OR BLANK, C10gFLG = "2. NOT DEPLOYED SINCE LAST SURVEY"

C11. Now thinking about your **most recent** deployment....

In what country did you spend the most amount of time? [DO NOT READ LIST]

1 Afghanistan

2 Iraq

3 Kuwait

4 Saudi Arabia

5 United States

8 Other: [SPECIFY: _____]

9 [VOL] Don't know

10 [VOL] Refused

C11a. Was this deployment: [READ CHOICES]

1 With your regular unit -that is, with the unit you are assigned to and train with when in a reserve status

2. As an I.M.A. (Individual Mobilization Augmentee)

3. As a "filler" to a unit other than the one you are normally assigned to

4 Or as something else? [Describe:_____]

- 8 [VOL] Don't know
9 [VOL] Refused

C12. On what date did you begin that deployment? [PROBE FOR MONTH AND YEAR]

1 ____/____ [RANGE: 1940-CURRENT YEAR]

M M Y Y Y Y

- 8 [VOL] Don't know
9 [VOL] Refused

C13. On what date did you finish that deployment? [PROBE FOR MONTH AND YEAR]

1 ____/____ [RANGE: 1940-CURRENT YEAR] [MUST BE LATER THAN C12]

M M Y Y Y Y

- 2 Deployment has not ended
8 [VOL] Don't know
9 [VOL] Refused

C14. What was your age when you began this most recent deployment?

____[age in years] range 17-80 [if response is over 60, verify]

- 8 [VOL] Don't Know
9 [VOL] Refused

C15. What was your MOS (Military Occupational Specialties) number and a brief description of that role during your most recent deployment? [ALLOW MULTIPLE RESPONSES]

- 1 _____
8 [VOL] Don't know
9 [VOL] Refused

[IF ANSWERED "DON'T KNOW" TO C15, GO TO C16; OTHERWISE GO TO C17]

C16. Which category best fits you MOST? [READ LIST AS NECESSARY; ALLOW MULTIPLE RESPONSES]

- 1 Personnel and Administration
2 Intelligence
3 Infantry
4 Logistics
5 Marine Air Ground Task Force (MAGTF) Plans
6 Communications
8 Field Artillery
11 Utilities
13 Engineer, Construction, Facilities and Equipment
18 Tank and Assault Amphibious Vehicle
21 Ground Ordnance Maintenance
23 Ammunition and Explosive Ordnance Disposal
25 Operational Communications
26 Signals Intelligence/Ground Electronic Warfare
27 Linguist (Officer/Enlisted)
28 Ground Electronics Maintenance
30 Supply Administration and Operations
31 Traffic Management

- 33 Food Service
- 34 Financial Management
- 35 Major Transport
- 40 Data Systems
- 41 Marine Corps Exchange
- 43 Public Affairs
- 44 Legal Services
- 46 Visual Information
- 55 Music
- 57 Nuclear, Biological and Chemical Defense
- 58 Military Police and Corrections
- 59 Electronics Maintenance
- 60 60/61/62 Aircraft Maintenance
- 63 63/64 Avionics
- 65 Aviation Ordnance
- 66 Aviation Logistics
- 68 Meteorological and Oceanographic (METOC) Services
- 70 Airfield Services
- 72 Air Control/Air Support/Anti-air Warfare/Air Traffic Control
- 73 Navigation Officer and Enlisted Flight Crews
- 75 Pilots/Naval Flight Officers
- 76 Navy Officer Designators (DES) and Billet Codes (NOBC)
- 77 Navy Enlisted Classification Codes (NEC's)
- 78 8000-9599 Category "B" MOS's
- 79 9600-9699 Special Education Program
- 80 9700-9999 Identifying MOS's and Reporting MOS's
- 97 Other [SPECIFY] _____
- 98 [VOL] Don't know
- 99 [VOL] Refused

[READ ONLY IF NECESSARY]

C17. What is your gender? [If the respondent does not immediately say Male or Female: What sex do you consider yourself to be? [INTERVIEWER: DO NOT READ CHOICES]

- 1 Male
- 2 Female
- 3 Other [SPEC:_____]
- 9 [VOL] Refused

[IF ANSWERED 'ZERO', 'DON'T KNOW', OR 'REFUSED' TO QUESTION C10, SKIP TO SECTION E. IF ANSWERED 'YES' TO C10g, or C10gFLG='1' THEN CONTINUE TO SECTION D, OTHERWISE SKIP TO SECTION E]

D. General Military Experience

I'm now going to continue asking you about your **most recent deployment**.

TRAINING AND DEPLOYMENT PREPARATION

I am going to read several statements about how well prepared you were by the military for your most recent deployment, and I'd like to know how much you agree or disagree with each statement. There are 5 answer choices you can use: strongly agree, somewhat agree, somewhat disagree, strongly disagree, or neither agree nor disagree.

The (first/next) statement is [STATEMENT]. Do you agree, disagree OR do you neither agree nor disagree (3)?

[IF AGREE: Do you agree strongly (5) or agree somewhat (4)?]

[IF DISAGREE: Do you disagree strongly (1) or disagree somewhat (2)?]

| (ROTATE) | Strongly disagree | Somewhat disagree | Neither agree nor disagree | Somewhat agree | Strongly agree | (VOL) DK | (VOL) RF |
|--|-------------------|-------------------|----------------------------|----------------|----------------|----------|----------|
| D1. I had all the supplies and equipment needed to get my job done. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| D2. The equipment I was given functioned the way it was supposed to. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| D3. I received adequate training on how to use my equipment. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| D6. I was accurately informed about what to expect from the enemy. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| D8. I was accurately informed of what daily life would be like during my deployment. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

UNIT SUPPORT

The next statement is about your relationships with other military personnel during your most recent deployment.

How much do you agree or disagree that: [STATEMENT].

Do you agree, disagree, OR do you neither agree nor disagree (3)?

[IF AGREE: Do you agree strongly (5) or agree somewhat (4)?]

[IF DISAGREE: Do you disagree strongly (1) or disagree somewhat (2)?]

| (ROTATE) | Strongly disagree | Somewhat disagree | Neither agree nor disagree | Somewhat agree | Strongly agree | (VOL) DK | (VOL) RF |
|--|-------------------|-------------------|----------------------------|----------------|----------------|----------|----------|
| D11. I felt a sense of camaraderie between myself and other soldiers in my unit. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

LIFE & FAMILY CONCERNS

The next statement refers to concerns you may have had related to your life and family back home during your **most recent deployment**.

While you were deployed, how concerned were you about [ITEM]? Would you say not at all, a little, moderately or a great deal?

| (ROTATE) | Not at all concerned | A little concerned | Moderately concerned | Concerned A great deal | (VOL) Not applicable | VOL DK | VOL RF |
|---|----------------------|--------------------|----------------------|------------------------|----------------------|--------|--------|
| D34. Harming your relationship with your spouse or significant other. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

COMBAT EXPERIENCES

The following statements are about combat experiences you may have had during your most recent deployment.

While deployed:

*D41a. Did you participate in active combat operations as a member of a combat unit?

1 Yes

2 No

8 [VOL] Don't know

9 [VOL] Refused

*D41b. Did you experience combat as a member of medical staff, helicopter crew or corpse detail?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

*D53d. Were you injured or wounded during your most recent deployment?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

D54. Next I'm going to read a list of reasons for injuries or accidents.

Please tell me which, if any, of them you experienced during your most recent deployment. [MULTIPLE RECORD FOR EACH "YES"]

- Being hit by shrapnel or a fragment
- Being hit by a bullet or receiving a gunshot wound
- A motor vehicle crash with a vehicle of any type, including a helicopter or airplane
- An explosion or blast, such as an I.E.D. (Improvised Explosive Device), R.P.G. (Rocket Propelled Grenade), Land mine, Grenade, etc.
- Being hit by a Blunt object
- A fall
- OR some other injury or accident [SPECIFY] _____
- None

[IF NONE, DK OR REF FOR D54, SKIP TO D57]

D54b. I recognize that these experiences may have occurred as a result of a single event or multiple events. How many separate events did you experience?

[1-20; 21=21+; 98=Not Sure; 99= Refused]

[IF D54b=1 GO TO D55]

[READ IF D54b>1 and <4]

Now I'd like to know more about these [# OF EVENTS FROM D54b] events **[CONTINUE TO D54c1]**.

[READ IF D54b>3]

Now I'd like to know more about some of these events. Let's start with the most serious one and then I will ask about 2 others[**CONTINUE TO D54c1**].

D54c1. Thinking about (the worst/the next worst) of these events, please briefly describe what happened so I know how to refer to it: [enter brief description of event]

[REPEAT D54c1 UNTIL OBTAINED BRIEF DESCRIPTION ALL D54A EVENTS (3 MAXIMUM), RANDOMLY PICK ONE D54c1 EVENT TO CONTINUE WITH]

D54c2. Now I am only going to ask more specifically about one event. During [D54c1 RANDOMLY PICKED EVENT DESCRIPTION], which of the following did you experience? [READ LIST; **MULTIPLE RECORD**]

[READ ALL ITEMS "YES" IN D54a]

- Being hit by shrapnel or a fragment
- Being hit by a bullet or receiving a gunshot wound
- A motor vehicle crash with a vehicle of any type, including a helicopter or airplane
- An explosion or blast, such as an I.E.D. (Improvised Explosive Device), R.P.G. (Rocket Propelled Grenade), Land mine, Grenade, etc.
- Being hit by a Blunt object
- A fall
- or some other injury or accident [SPECIFY] _____

D55. Now I am going to ask you about symptoms you may have experienced after this event.

a. When this event occurred, were you dazed, confused or "seeing stars"?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

b. Was there any period of time just before the event that you did not or do not remember?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

[IF YES]

D55d. How long was the period of time just before the event that you did not or do not remember? How many seconds, minutes or hours was this period? _____ **[ALLOW FOR ANSWER IN SECONDS, MINUTES, OR HOURS OR DAYS]**

D55c. Was there any period of time just after the event that you did not or do not remember?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

[IF YES]

.D55cf How long was the period of time just after the event that you did not or do not remember? How many seconds, minutes or hours was this period? _____ **[ALLOW FOR ANSWER IN SECONDS, MINUTES, OR HOURS OR DAYS]**

D55d. Did you or do you currently have problems remembering details about the event?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

D55e. Did anyone report that you have had trouble remembering details about the event?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

D55f. During or as a result of the event, did anyone report that you lost consciousness or “blacked out?”

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

D55g. And during or as a result of the event, do you remember losing consciousness or “blacking out”?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

[IF YES TO EITHER f OR g]

D55h. How many times did you lose consciousness during or as a result of this event? **[1-20; 21=NS; 22=Ref]**

D55i. And, thinking about all of the times when you lost consciousness during or as a result of this event, what is the LONGEST AMOUNT OF TIME during which you were unconscious? __SPECIFY IN SECONDS, MINUTES OR HOURS OR DAYS _____

D55j. During this event did you hit your head?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

D55k. During this event were you wearing a helmet?

- 1 Yes
- 2 No
- 3 [VOL] Only during part of the event
- 8 [VOL] Don't know
- 9 [VOL] Refused

[ASK IF D55k=1 OR 3]

D55l. What type of helmet were you wearing? [READ LIST]

- 1 Kevlar or ACH (Advanced Combat Helmet)
- 2 Sports Helmet
- 3 Motorcycle helmet
- 4 Other [Specify] _____
- 8 [VOL] Don't know
- 9 [VOL] Refused

D56. Since this event occurred, how often have you experienced the following? [READ ITEM & ANSWER CHOICES]

| | All of the time | Most of the time | Some of the time | A little of the time | Not at all | VOL Don't Know | VOL Refused |
|-----------------------------|-----------------|------------------|------------------|----------------------|------------|----------------|-------------|
| a. Headaches | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| b. Memory Problems | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| c. Nausea or Vomiting | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| d. Irritability | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| e. Ringing in the ears | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| f. Dizziness | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| g. Balance problems | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| h. Difficulty concentrating | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| i. Vision Problems | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

DEPLOYMENT CONCERNS

Next, I have an agree-disagree statement about how you felt during your most recent deployment. The statement is [STATEMENT].

Do you agree, disagree, OR do you neither agree nor disagree (3)?

[IF AGREE: Do you agree strongly (5) or agree somewhat (4)?]

[IF DISAGREE: Do you disagree strongly (1) or disagree somewhat (2)?]

| (ROTATE) | Strongly disagree | Some-what disagree | Neither agree nor disagree | Some what agree | Strongly agree | VOL DK | VOL RF | VOL N/A |
|---------------------------------------|-------------------|--------------------|----------------------------|-----------------|----------------|--------|--------|---------|
| D88. I thought I would never survive. | 1 | 2 | 3 | 4 | 5 | 8 | 9 | 10 |

POST-DEPLOYMENT SUPPORT

We have completed the questions about your most recent deployment. The next set of statements refers to questions that are about the social support you had after your most recent deployment.

The (first/next) is [STATEMENT]. Do you agree, disagree, OR do you neither agree nor disagree (3)?

[IF AGREE: Do you agree strongly (5) or agree somewhat (4)?]

[IF DISAGREE: Do you disagree strongly (1) or disagree somewhat (2)?]

| (ROTATE) | Strongly disagree | Somewhat disagree | Neither agree nor disagree | Somewhat agree | Strongly agree | (VOL) DK | (VOL) RF |
|--|-------------------|-------------------|----------------------------|----------------|----------------|----------|----------|
| D109. The reception I received when I returned | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| from my deployment made me feel appreciated for my efforts. | | | | | | | |
| D110. The American people made me feel at home when I returned. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| D111. When I returned, people made me feel proud to have served my country in the Armed Forces. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| D113. People at home just don't understand what I have been through while in the Armed Forces. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| D114. There are people to whom I can talk about my deployment experiences. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| D115. The people I work with respect the fact that I am a veteran. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

Anger

These next questions are about how my may feel or behave since your most recent deployment. I'd like to know how much you agree or disagree with each statement.

The (first/next) is [STATEMENT]. Do you agree, disagree, OR do you neither agree nor disagree (3)?

[IF AGREE: Do you agree strongly (5) or agree somewhat (4)?]

[IF DISAGREE: Do you disagree strongly (1) or disagree somewhat (2)?]

| (ROTATE) | Strongly disagree | Somewhat disagree | Neither agree nor disagree | Somewhat agree | Strongly agree | (VOL) DK | (VOL) RF |
|--|-------------------|-------------------|----------------------------|----------------|----------------|----------|----------|
| D300. I often find myself getting angry at people or situations | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| D301. When I get angry, I get really mad | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| D302. When I get angry at someone, I want to clobber the person | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| D303. My anger prevents me from getting along with people as well as I'd like to | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| D304. I have trouble controlling violent behavior (for example hitting someone) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

E. Health History

E1. Turning to your health, in general, would you say your health is: [READ CHOICES]

- 1 Excellent
- 2 Very good
- 3 Good
- 4 Fair
- 5 Poor
- 8 [VOL] Don't know
- 9 [VOL] Refused

G. Psychosocial Resources

These next statements refer to social support you have felt you received in the **past 12 months** and I'd like to know how much you agree or disagree with each statement.

The (first/next) is [STATEMENT]. Do you agree, disagree, OR do you neither agree nor disagree (3)?

[IF AGREE: Do you agree strongly (5) or agree somewhat (4)?]

[IF DISAGREE: Do you disagree strongly (1) or disagree somewhat (2)?]

| ROTATE | Strongly disagree | Somewhat disagree | Neither agree nor disagree | Somewhat agree | Strongly agree | (VOL) DK | (VOL) RF |
|--|-------------------|-------------------|----------------------------|----------------|----------------|----------|----------|
| G1. I am carefully listened to and understood by family members or friends. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| G2. Among my friends or relatives, there is someone who makes me feel better when I am feeling down. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| G3. I have problems that I can't discuss with family or friends. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| G4. Among my friends or relatives, there is someone I go to when I need good advice. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| G5. My friends or relatives would lend me money if I needed it. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| G6. My friends or relatives would help me move my belongings if I needed to. | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| G7. The neighborhood where I currently live is a close-knit or | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

| | | | | | | | |
|-----------------------|--|--|--|--|--|--|--|
| unified neighborhood. | | | | | | | |
|-----------------------|--|--|--|--|--|--|--|

H. General traumas

Next I am going to read a series of statements that refer to events you may have experienced at any time in **your lifetime**. It is important for the research that you think carefully before answering.

a) Since we last spoke on the phone in [MONTH] of [YEAR], have you...[READ EACH ITEM]

[IF C10g was 'YES' or C10gFLG="1", IMMEDIATELY ASK FOR ANY "YES"]

[IF C10>0, IMMEDIATELY ASK FOR ANY "YES"]

b) Was that related to your **most recent** military deployment? [YES, NO, BOTH (MORE THAN ONE INSTANCE), DK, REF]

| | a. In your lifetime, have you: | | | | (IF C10g was 'YES') b. Was that related to your most recent military deployment? | | |
|---|--------------------------------|----|-------------|--------------|---|----|-------------|
| DO NOT ROTATE | Yes | No | (Vol) DK | (Vol) Ref | Yes | No | Vol Both |
| *H1. Experienced combat or exposure to a war zone in the military or as a civilian | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| *H 2. Been in a fire or explosion | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 3. Been raped | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 4. Experienced another kind of sexual assault or unwanted sexual contact as a result of force, threat of harm, or manipulation | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 5. Been shot or stabbed | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 6. Been held captive, tortured, or kidnapped | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 7. Been mugged, held up, or threatened with a weapon | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 8. Been badly beaten up | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 9. Been in a serious transportation accident (for example a serious car or motor vehicle crash, boat accident, plane crash or train wreck). | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 10. Experienced any other kind of serious accident or injury | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 11. Experienced a natural disaster – for example, a fire, flood, earthquake – in which you were hurt or your property was damaged | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 12. Been diagnosed with a life-threatening illness | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 13. Had a child of yours diagnosed as having a life-threatening illness | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 14. Witnessed someone being killed or seriously injured | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 15. Unexpectedly discovered a dead body | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 16. Learned that a close friend or relative was raped or sexually assaulted | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 17. Learned that a close friend or relative was seriously physically attacked | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 18. Learned that a close friend or relative was | 1 | 2 | 8 | 9 | 1 | 2 | 3 |

| | | | | | | | |
|--|---|---|---|---|---|---|---|
| seriously injured in a motor vehicle crash | | | | | | | |
| * H 19. Learned that a close friend or relative was seriously injured in any other accident | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 20. Experienced the sudden, unexpected death of a close friend or relative | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 21. Caused serious injury, harm or death to someone else | | | | | | | |
| * H 22. Witnessed severe human suffering | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| H 23. Experienced mental illness personally or the mental illness of someone close to you | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| H 24. Had a parent who had a problem with drugs or alcohol | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| H 25. Had a family member other than a parent with a serious drug or alcohol problem | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| H 26. Been through a divorce or “break up” with a partner or significant other | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| H 27. Lost your job | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| H 28. Been emotionally mistreated – for example, shamed, embarrassed, ignored, or repeatedly told you were no good | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| H 29. Seen or heard physical fighting between your parents or caregivers, for example, grabbed, slapped, or had something thrown, kicked, bitten, hit with a fist, or hit with something hard, or threatened with, or hurt by, a knife or gun? | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| H 30. Experienced stressful legal problems – for example, being sued or suing someone else | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| H 31. Been unemployed and seeking employment for at least 3 months | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| H 32. Had serious financial problems | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| *H 33. Had a serious operation | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| H 34. Been Robbed or had your home broken into | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| * H 35. Been exposed to toxic substances , for example, dangerous chemicals or radiation | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| H 36. Had problems getting access to adequate healthcare | 1 | 2 | 8 | 9 | 1 | 2 | 3 |
| *H 37. Experienced any other extraordinarily stressful situation or event | 1 | 2 | 8 | 9 | 1 | 2 | 3 |

CATI NOTE: IF RESPONDENT DOES NOT RECALL OR WILL NOT SAY WHAT THE OTHER STRESSFUL SITUATION OR EVENT WAS, DO NOT INCLUDE IN THE LIST OF TRAUMAS FOR FOLLOW-UP QUESTIONS.

[IF ‘YES’ TO H37]

H37a. Can you briefly describe what that was?

Next I am going to read a series of statements that refer to events you may or may not have experienced in your lifetime.

In your lifetime...

| | | | | |
|---|---|---|---|---|
| H38. <i>Did a parent or other adult in the household you grew up in</i> often or very often insult you, put you down, or act in a way that made you afraid you would be physically hurt? | 1 | 2 | 8 | 9 |
| H39. <i>Did a parent or other adult in the household you grew up in</i> often or very often grab, shove, or slap you, or hit you so hard you had marks or were injured? | 1 | 2 | 8 | 9 |
| H40. <i>Did a parent or other adult in the household you grew up in</i> touch you or have you touch them in a sexual way, or attempt to or actually have oral, anal, or vaginal intercourse with you? | 1 | 2 | 8 | 9 |
| H41. <i>Was a parent or other adult in the household you grew up in</i> depressed or mentally ill, or ever attempt suicide? | 1 | 2 | 8 | 9 |

TRAUMA LIST FOR FOLLOW-UP QUESTIONS

- *1. Experienced combat or exposure to a war zone in the military or as a civilian
- *2. Been in a fire or explosion
- *3. Been raped
- *4. Experienced another kind of sexual assault or unwanted sexual contact as a result of force, threat of harm, or manipulation
- *5. Been shot or stabbed
- *6. Been held captive, tortured, or kidnapped
- *7. Been mugged, held up, or threatened with a weapon
- *8. Been badly beaten up
- *9. Been in a serious transportation accident (for example a serious car or motor vehicle crash, boat accident, plane crash or train wreck).
- *10. Experienced any other kind of serious accident or injury
- *11. Experienced a natural disaster – for example, a fire, flood, earthquake – in which you were hurt or your property was damaged
- *12. Been diagnosed with a life-threatening illness
- *13. Had a child of yours diagnosed as having a life-threatening illness
- *14. Witnessed someone being killed or seriously injured
- *15. Unexpectedly discovered a dead body
- *16. Learned that a close friend or relative was raped or sexually assaulted
- *17. Learned that a close friend or relative was seriously physically attacked
- *18. Learned that a close friend or relative was seriously injured in a motor vehicle crash
- *19. Learned that a close friend or relative was seriously injured in any other accident
- *20. Experienced the sudden, unexpected death of a close friend or relative
- *21. Caused serious injury, harm or death to someone else
- *22. Witnessed severe human suffering
- *33. Had a serious operation
- *35. Been exposed to toxic substances (like dangerous chemicals or radiation)
- *37. Experienced any other extraordinarily stressful situation or event

[CREATE COUNT OF *D ITEMS ANSWERED AFFIRMATIVELY (YES, OR ANY EXPOSURE). LIST AS POSSIBLE DEPLOYMENT-RELATED TRAUMAS IN J28 PER INSTRUCTIONS]

(IF *D41a=1) Experiencing combat as a member of a combat unit

(IF *D41b=1) Experiencing combat as a member of a medical team, helicopter crew or being on corpse detail

(IF *D53d=1) Being injured or wounded during most recent deployment

INSTRUCTIONS

IF ANY YES *Ha TRAUMA QUESTIONS, CREATE TWO LISTS: DEPLOYMENT RELATED TRAUMAS AND NON-DEPLOYMENT RELATED TRAUMAS. ITEMS ANSWERED 'BOTH' IN b SHOULD APPEAR IN BOTH LISTS.

CREATE TWO RANDOM SELECTIONS FROM EACH LIST FOR J1 NON-DEPLOYMENT AND J28 DEPLOYMENT RELATED

IF HAD NON-DEPLOYMENT TRAUMAS IN WAVE 1:

IF THERE ARE ZERO NON-DEPLOYMENT RELATED TRAUMAS IN WAVE 2, GO TO Q.J2

IF ONLY 1 NON-DEPLOYMENT RELATED TRAUMA, GO TO Q.J1B

IF MORE THAN 1 NON-DEPLOYMENT RELATED TRAUMA, GO TO Q.J1

IF DID NOT HAVE NON-DEPLOYMENT TRAUMAS IN WAVE 1:

IF THERE ARE ZERO NON-DEPLOYMENT RELATED TRAUMAS, GO TO Q.J28

IF ONLY 1 NON-DEPLOYMENT RELATED TRAUMA, GO TO Q.J2

IF MORE THAN 1 NON-DEPLOYMENT RELATED TRAUMA, GO TO Q.J1A

AFFIRMATIVE ANSWERS TO * D ITEMS SHOULD APPEAR IN THE DEPLOYMENT-RELATED TRAUMA LIST PER INSTRUCTIONS BELOW

J. Post-Traumatic Stress Disorder

Now, please consider the lifetime events we just discussed.

[IF THERE IS ONLY ONE NON-DEPLOYMENT RELATED TRAUMA, SELECT IT AND SKIP TO J2]

J1. Of the events we just discussed that were not deployment-related, which event would you consider the worst?

[*H1a- *H37a RANDOM PICK1], OR

[*H1a-H37a RANDOM PICK2], OR

one of the other non-deployment related events you experienced?

[PROBE: Would you like me to read the list of items you mentioned?]

1

98 [VOL] Don't know

99 [VOL] Refused

[LIST NON-DEPLOYMENT EVENTS ANSWERED 'YES' FROM *H1a-*H37a TRAUMA QUESTIONS]

[CATI: IF J1=DK/REF RANDOMLY SELECT A NON-DEPLOYMENT-RELATED EVENT ANSWERED 'YES' FROM *H1a-*H37A]

[NOTE: WE ARE NOT PREVENTING THE SAME KIND OF EVENT FROM BEING CHOSEN AS WAS SELECTED IN YEAR 1 – MULTIPLE INSTANCES OF THE SAME TYPE OF TRAUMA CAN OCCUR]

[IF IN WAVE 1 THEY DID NOT EXPERIENCE A TRAUMA OUTSIDE OF MOST-RECENT DEPLOYMENT SKIP TO J2.]

J1B. Now, the last time we spoke, you told us one of the worst events you had experienced was [INSERT WAVE 1 DUWNT/WORST NON-DEPLOYMENT RELATED TRAUMA FROM WAVE 1]. Please consider this event as well as the event you just told us was the worst from this past year.

Of these two events, which event would you consider the worst? [DISPLAY WORST NON-DEPLOYMENT TRAUMA FROM WAVE 1 AND WORST NON-DEPLOYMENT TRAUMA FROM WAVE 2] [IF THEY ARE THE SAME CATEGORY OF TRAUMA, BRING THE QUESTION TO THE SCREEN BECAUSE THE RESPONDENT WILL STILL BE ABLE TO CHOOSE AMONG THE TWO TRAUMA INSTANCES FOR REFERENCE EVEN THOUGH THE DATA WILL NOT DIFFERENTIATE THEM.]

1 _____ (WAVE 1 EVENT)
2 _____ (WAVE 2 EVENT)

98 [VOL] Don't know
99 [VOL] Refused

[CATI: IF J1B=DK/REF RANDOMLY SELECT ONE OF TWO EVENTS]

[CATI: DEFINE "WORST NON-DEPLOYMENT RELATED TRAUMA" AS ANSWER TO J1B, DUWNT FROM WAVE 1 IF NO TRAUMAS OCCURRED IN WAVE 2 LIST OR SINGLE NON-DEPLOYMENT EVENT CODED FROM *H1a-*H37a TRAUMA QUESTIONS]

In this next section, I'm going to ask about this event: [WORST N-D TRAUMA].
[READ IF W1 TRAUMA WAS SELECTED: (You may recall talking about it in your last interview.)]

[NOTE: IF RESPONDENT DOES NOT RECALL THE EVENT FROM LAST TIME, SAY: "I realize that you may not remember discussing this event last time, but let me go through the questions to see if anything jars your memory of it." – IF RESPONDENT DOESN'T RECALL THE EVENT, THEN CODE AS "NOT SURE" IN J2 TO J5 AND, "NOT AT ALL" IN J6 TO J22]

[IF "WORST NON-DEP TRAUMA" IS FROM YEAR 1, SKIP TO J6, ELSE ASK:]

J2. During approximately what year did this event -- [WORST N-D TRAUMA] -- occur?
 [PROBE: Your best estimate is fine.] [IF THERE WAS MORE THAN ONE OCCURRENCE OF THE EVENT, THEN PROBE: Thinking about the WORST time this happened, what year was it? IF THE EVENT WAS ONGOING, PROBE: Thinking about the WORST time during this period, what year was it?

1 _____ [4 DIGIT YEAR]
8 [VOL] Don't know
9 [VOL] Refused

[IF C10g IS "YES", or C10FLG="1" THEN ASK J3 IF MONTH AND YEAR REPORTED IN J2 IS THE SAME AS THE MOST RECENT DEPLOYMENT IN C12]

J3. Was this before or after you left on your most recent deployment?

- 1 Before
- 2 After
- 3 (VOL) During
- 8 (VOL) Not sure
- 9 (VOL) Refused

Now I'm going to ask you about different thoughts and feelings you may have had because of this event --
[WORST N-D TRAUMA].

J4. When this event occurred, did you feel terrified?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

J5. When this event occurred, did you feel helpless?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

[CATI NOTE: Display the event at the top of each screen for reference]

Now I'm going to ask you about problems and complaints you may have had because of this event. Please tell me how much you were ever bothered by each of these problems in relation to this stressful experience.

SINCE YOUR LAST INTERVIEW in [month] [year], [ITEM].

| READ IN ORDER | Not at all | A little bit | Moderately | Quite a bit | Extremely | (VOL) DK | (VOL) RF |
|--|------------|--------------|------------|-------------|-----------|----------|----------|
| J6. How much were you ever bothered by: Repeated, disturbing memories, thoughts, or images of this stressful experience? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J7. How much were you ever bothered by: Repeated, disturbing dreams of this stressful experience? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J8. How much were you ever bothered by: Suddenly acting or feeling as if this stressful experience were happening again (as if you were reliving it)? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J9. How much were you ever bothered by: Feeling very upset when something reminded you of this stressful experience? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J10. How much were you ever bothered by: Having physical reactions such as heart pounding, trouble breathing, sweating when something reminded you of this stressful experience? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

| | | | | | | | |
|--|---|---|---|---|---|---|---|
| J11. How much were you ever bothered by: Avoiding thinking about or talking about this stressful experience or avoiding having feelings related to it? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J12. How much were you ever bothered by: Avoiding activities or situations because they reminded you of this stressful experience? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J13. How much were you ever bothered by: Trouble remembering important parts of this stressful experience? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J14. How much were you ever bothered by: Loss of interest in activities that you used to enjoy (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J15. How much were you ever bothered by: Feeling distant or cut off from other people? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J16. How much were you ever bothered by: Feeling emotionally numb or being unable to have loving feelings for those close to you? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J17. How much were you ever bothered by: Feeling as if your future will somehow be cut short? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| J18. How much were you ever bothered by: Trouble falling or staying asleep? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J19. How much were you ever bothered by: Feeling irritable or having angry outbursts? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J20. How much were you ever bothered by: Having difficulty concentrating? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J21. How much were you ever bothered by: Being "super-alert" or watchful or on guard? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J22. How much were you ever bothered by: Feeling jumpy or easily startled? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

[IF ANY J6 – J22 > 1 EXCLUDING DON'T KNOW OR REFUSED, GO TO J23, OTHERWISE GO TO J28.]

J23. How difficult did these problems make it for you to do your work, take care of things at home, or get along with other people? Would you say [READ CHOICES]?

- 1 Not difficult at all
- 2 Somewhat difficult
- 3 Very difficult
- 4 Extremely difficult
- 8 [VOL] Don't know
- 9 [VOL] Refused

J23a. When you had several of these bad moods, feelings, and memories, how distressing was it for you? Was it [READ CHOICES]?

- 1 Not at all distressing
- 2 Mildly distressing
- 3 Moderately distressing
- 4 Severely distressing

- 8 [VOL] Don't know
- 9 [VOL] Refused

[ASK J24 ONLY IF MORE THAN ONE QJ6-QJ22 ANSWERED 2-6, OTHERWISE GO TO J25]

J24. Did these experiences or feelings you've had ever seem to go together or happen at the same time?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

J25. How soon after this stressful experience did you start to have any of these problems you've mentioned?
[READ CHOICES IF NEEDED TO PROBE]

- 1 Same day
- 2 That week
- 3 Within 30 days
- 4 Within 6 months
- 5 Within 1 year
- 6 More than 1 year
- 8 [VOL] Don't know
- 9 [VOL] Refused

J26. What was the longest period of time during which you were having these problems? [READ CHOICES IF NEEDED TO PROBE]

- 1 Less than 1 month
- 2 Between 1 and 3 months
- 3 Between 3 and 6 months
- 4 Between 6 months and 1 year
- 5 More than 1 year
- 8 [VOL] Don't know
- 9 [VOL] Refused

J27. When was the most recent time that you had any of these problems as a result of this stressful experience? [READ CHOICES IF NEEDED TO PROBE]

- 1 Within the last week
- 2 Within the last 30 days
- 3 Over a month ago, but within the past 3 months,
- 4 Over 3 months ago, but within the past 6 months,
- 5 Over 6 months ago, but within the past 12 months,
- 6 More than 12 months ago
- 8 [VOL] Don't know
- 9 [VOL] Refused

CATI INSTRUCTIONS

IF NEVER DEPLOYED (C10=0), GO TO SECTION K

IF NO DEPLOYMENT TRAUMAS IN WAVE 1:

IF NO DEPLOYMENT RELATED TRAUMAS IN W2 *Hb1-*Hb37 or *D SERIES, GO TO SECTION K

IF ONLY ONE DEPLOYMENT TRAUMA IN W2 *Hb1-*Hb37 or *D SERIES, GO TO Q.J31
IF MORE THAN ONE DEPLOYMENT-RELATED EVENTS IN W2 *Hb1-*Hb37 or *D SERIES, GO TO Q.J28

IF A DEPLOYMENT TRAUMA OCCURRED IN WAVE 1:

IF NO DEPLOYMENT RELATED TRAUMAS IN W2 *Hb1-*Hb37 or *D SERIES, GO TO Q.J31

IF ONLY ONE DEPLOYMENT TRAUMA IN W2 *Hb1-*Hb37 or *D SERIES, GO TO Q.J28B

IF MORE THAN ONE DEPLOYMENT-RELATED EVENTS IN W2 *Hb1-*Hb37 or *D SERIES, GO TO Q.J28A

DEPLOYMENT-RELATED PTSD

Now, please think about stressful experiences you have had in your lifetime that that were **deployment-related**.

[IF THERE IS ONLY ONE DEPLOYMENT- RELATED TRAUMA, SELECT IT AND SKIP TO INSTRUCTIONS AT J30]

J28. You mentioned that you experienced stressful events related to your most recent deployment such as
[*H1a-H37a RANDOM PICK1],OR
[*H1a-H37a RANDOM PICK2],

. [IF SUM(D*ITEMS)>0, READ: You also told us earlier that you experienced other events during your most recent deployment such as
[*D RANDOM PICK1], OR
[*D RANDOM PICK2]

Thinking about these deployment-related events we have already discussed or some other deployment-related event, which event would you consider the worst? [PROBE: Would you like me to read the list of items you mentioned?]

[CATI: SHOW ALL TRAUMAS IN THE LIST FROM *H1b-*H37b & *D ITEMS & *D ITEMS + OTHER]

1
97 OR SOME OTHER EVENT RELATED TO YOUR MOST RECENT DEPLOYMENT? (SPECIFY)
98 [VOL] Don't know
99 [VOL] Refused

[CATI: IF J28 IS "DK" OR "REF" RANDOMLY SELECT TRAUMA FROM LIST OF DEPLOYMENT RELATED EVENTS FROM *H1b-*H37b & *D ITEMS – EXCLUDE "WORST NON-DEPLOYMENT RELATED TRAUMA" FROM THIS RANDOM SELECTION]

[IF NO DEPLOYMENT RELATED TRAUMAS FROM WAVE 1 SKIP TO J31]

J28B. Now I also want you to consider [SINGLE TRAUMA OR J28A ANSWER] AS WELL AS the event you told us about from your previous deployment [WAVE 1 DUWDT/ INSERT DEPLOYMENT RELATED TRAUMA FROM WAVE 1]. (NOT CALLING WORST BECAUSE IT MAY HAVE BEEN A RANDOM PICK AND DON'T WANT TO HAVE SOMEONE TRY TO CHANGE WAVE 1 ANSWERS]

Which of these two traumas would you consider the worst? [DISPLAY WORST DEPLOYMENT RELATED TRAUMA FROM WAVE 1 AND WORST DEPLOYMENT RELATED TRAUMA FROM WAVE 2] [IF THEY ARE

THE SAME CATEGORY OF TRAUMA, BRING THE QUESTION TO THE SCREEN BECAUSE THE RESPONDENT WILL STILL BE ABLE TO CHOOSE AMONG THE TWO TRAUMA INSTANCES FOR REFERENCE EVEN THOUGH THE DATA WILL NOT DIFFERENTIATE THEM.]

- 1 _____ (WAVE 1 EVENT)
- 2 _____ (WAVE 2 EVENT)
- 98 [VOL] Don't know
- 99 [VOL] Refused

DEFINE "WORST DEP TRAUMA" AS ANSWER TO J28B OR DUWDT IF NO TRAUMAS FROM MOST RECENT DEPLOYMENT (OR C10GFLG="2") OR SINGLE TRAUMA FROM MOST RECENT DEPLOYMENT.

DEFINE "WORST DEP TRAUMA" AS ANSWER TO J28B OR DUWDT IF NO TRAUMAS FROM MOST RECENT DEPLOYMENT (OR C10GFLG="2") OR SINGLE TRAUMA FROM MOST RECENT DEPLOYMENT.

[NOTE: IF RESPONDENT DOES NOT RECALL THE EVENT FROM LAST TIME, SAY: "I realize that you may not remember discussing this event last time, but let me go through the questions to see if anything jars your memory of it." – IF RESPONDENT DOESN'T RECALL THE EVENT, THEN CODE AS "NOT AT ALL" IN J32 TO J48]

[IF "WORST DEP TRAUMA" IS FROM YEAR 1, SKIP TO J32, ELSE ASK:] [NOTE: SKIP ADDED 11/30/09]

[CATI INSTRUCTION: NEW SCREEN]

J31. During approximately what year did event [WORST DEP TRAUMA] occur?

[READ IF W1 TRAUMA WAS SELECTED: (Which you told us was the worst event from your previous deployment, you may recall talking about it in your last interview.)]

- 1 _____[4 DIGIT YEAR]
- 8 [VOL] Don't know
- 9 [VOL] Refused

Now I'm going to ask you about different thoughts and feelings you may have had because of [WORST DEP TRAUMA].

J31a. When this event occurred, did you feel terrified?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

J31b. When this event occurred, did you feel helpless?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

[CATI NOTE: Display the event at the top of each screen for reference]Now I'm going to ask you about problems and complaints you may have had because of this event that was related to your deployment. Please tell me how much you were ever bothered by each of these problems in relation to this stressful experience. SINCE YOUR LAST INTERVIEW in [month] [year], [ITEM].

| READ IN ORDER | Not at all | A little bit | Moderately | Quite a bit | Extremely | (VOL) DK | (VOL) RF |
|--|------------|--------------|------------|-------------|-----------|----------|----------|
| J32. How much were you ever bothered by: Repeated, disturbing memories, thoughts, or images of this stressful experience? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J33. How much were you ever bothered by: Repeated, disturbing dreams of this stressful experience? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J34. How much were you ever bothered by: Suddenly acting or feeling as if this stressful experience were happening again as if you were reliving it? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J35. How much were you ever bothered by: Feeling very upset when something reminded you of this stressful experience? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J36. How much were you ever bothered by: Having physical reactions, such as heart pounding, trouble breathing, sweating when something reminded you of this stressful experience? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J37. How much were you ever bothered by: Avoiding thinking about or talking about this stressful experience or | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

| | | | | | | | |
|--|---|---|---|---|---|---|---|
| avoiding having feelings related to it? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | | | | | | | |
| J38. How much were you ever bothered by: Avoiding activities or situations because they reminded you of this stressful experience? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J39. How much were you ever bothered by: Trouble remembering important parts of this stressful experience? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J40. How much were you ever bothered by: Loss of interest in activities that you used to enjoy? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J41. How much were you ever bothered by: Feeling distant or cut off from other people? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J42. How much were you ever bothered by: Feeling emotionally numb or being unable to have loving feelings for those close to you? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J43. How much were you ever bothered by: Feeling as if your future will somehow be cut short? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J44. How much were you ever bothered by: Trouble falling or staying asleep? | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | | | | | | | |
| J45. How much were you ever bothered by: Feeling irritable or having angry outbursts? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J46. How much were you ever bothered by: Having difficulty concentrating? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J47. How much were you ever bothered by: Being "super-alert" or watchful or on guard? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |
| J48. How much were you ever bothered by: Feeling jumpy or easily startled? (Would you say not at all, a little bit, moderately, quite a bit, or extremely?) | 1 | 2 | 3 | 4 | 5 | 8 | 9 |

[IF ANY OF QUESTIONS J32-J48 > 1 EXCLUDING DON'T KNOW OR REFUSED, GO TO J49; OTHERWISE GO TO NEXT SECTION.]

J49. How difficult did these problems make it for you to do your work, take care of things at home, or get along with other people? Would you say [READ CHOICES]?

- 1 Not difficult at all
- 2 Somewhat difficult
- 3 Very difficult
- 4 Extremely difficult
- 8 [VOL] Don't know
- 9 [VOL] Refused

J49a. When you had several of these bad moods, feelings, and memories, how distressing was it for you? Was it [READ CHOICES]?

- 1 Not at all distressing
- 2 Mildly distressing
- 3 Moderately distressing
- 4 Severely distressing
- 8 [VOL] Don't know
- 9 [VOL] Refused

[ASK J50 ONLY IF MORE THAN ONE QJ32-QJ48 ANSWERED 2-5 – ELSE GO TO J51]

J50. Did these experiences or feelings you've had ever seem to go together or happen at the same time?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

J51. How soon after this stressful experience did you start to have any of these problems you've mentioned?
[READ CHOICES IF NEEDED TO PROBE]

- 1 Same day
- 2 That week
- 3 Within 30 days
- 4 Within 6 months
- 5 Within 1 year
- 6 More than 1 year
- 8 [VOL] Don't know
- 9 [VOL] Refused

J52. What was the longest period of time during which you were having these problems? [READ CHOICES IF NEEDED TO PROBE]

- 1 Less than 1 month
- 2 Between 1 and 3 months
- 3 Between 3 and 6 months
- 4 Between 6 months and 1 year
- 5 More than 1 year
- 8 [VOL] Don't know
- 9 [VOL] Refused

J53. When was the most recent time you had any of these problems as a result of this stressful experience?
[READ CHOICES IF NEEDED TO PROBE]

- 1 Within the last week
- 2 Within the last 30 days
- 3 Over a month ago, but within the past 3 months,
- 4 Over 3 months ago, but within the past 6 months,
- 5 Over 6 months ago, but within the past 12 months,
- 6 More than 12 months ago
- 8 [VOL] Don't know
- 9 [VOL] Refused

K. Depression

The next questions are about ways you may have been feeling or may have behaved.

Ka. . Since we last spoke in [MONTH] of [YEAR],, did you ever have a period of at least two weeks during which you were bothered by [ITEM]?

Yes

No

(VOL) Don't know

(VOL) Refused

[IF 'YES' to a , ASK b and c]

b. When this occurred, were you bothered by this problem: [READ LIST]

c. Did this occur during the past 30 days, or not?

| | a. In your lifetime, did you ever have a period of at least two weeks during which you were bothered by | | b. When this occurred, were you bothered by this problem: [READ LIST] | | | | c. Did this occur during the past 30 days, or not? | |
|--|---|----|---|-------------------------|------------------|--------------|--|----|
| [DO NOT SHUFFLE ITEMS] | Yes | No | Several days | More than half the days | Nearly every day | (vol) DK/REF | Yes | No |
| K1. Little interest or pleasure in doing things. | 1 | 2 | 1 | 2 | 3 | 8/9 | 1 | 2 |
| K2. Feeling down, depressed, or hopeless | 1 | 2 | 1 | 2 | 3 | 8/9 | 1 | 2 |
| K3. Trouble falling or staying asleep, OR sleeping too much | 1 | 2 | 1 | 2 | 3 | 8/9 | 1 | 2 |
| K4. Feeling tired or having little energy | 1 | 2 | 1 | 2 | 3 | 8/9 | 1 | 2 |
| K5. Poor appetite OR overeating | 1 | 2 | 1 | 2 | 3 | 8/9 | 1 | 2 |
| K6. Feeling bad about yourself – or that you are a failure or have let yourself or your family down | 1 | 2 | 1 | 2 | 3 | 8/9 | 1 | 2 |
| K7. Trouble concentrating on things, such as reading the newspaper or watching television | 1 | 2 | 1 | 2 | 3 | 8/9 | 1 | 2 |
| K8. Moving or speaking so slowly that other people could have noticed? Or the opposite – being so fidgety or restless that you have been moving around a lot more than usual | 1 | 2 | 1 | 2 | 3 | 8/9 | 1 | 2 |
| K9. Thoughts that you would be better off dead or of hurting yourself in some way | 1 | 2 | 1 | 2 | 3 | 8/9 | 1 | 2 |

[IF 'YES' TO ANY QUESTIONS K1-K9 GO TO K10; OTHERWISE GO TO K14.]

K10. How difficult have these problems ever made it for you to do your work, take care of things at home, or get along with other people? Would you say [READ CHOICES]

[NOTE: READ ONLY IF NEEDED: "these problems" refers to problems that you mentioned being bothered by in just the past several questions which were about how you were feeling or may have behaved.]

- 1 Not difficult at all
- 2 Somewhat difficult
- 3 Very difficult
- 4 Extremely difficult
- 8 [VOL] Don't know
- 9 [VOL] Refused

[ASK IF MORE THAN 1 'YES' TO K1-K9 – ELSE SKIP TO K11a]

K11. Did these experiences or feelings you've had ever seem to go together or happen at the same time?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

K11a. What was the longest period of time during which you were having these problems? [READ CHOICES IF NEEDED TO PROBE]

- 1 Less than 1 month
- 2 Between 1 and 3 months
- 3 Between 3 and 6 months
- 4 Between 6 months and 1 year
- 5 More than 1 year
- 8 [VOL] Don't know
- 9 [VOL] Refused

K12. At what age did you first begin to have these problems?

_____ [AGE; RANGE 5-97] [98 = DON'T KNOW; 99 = REFUSE]

[IF K12 IS <13, PROBE:]

K12a When you say [ANSWER], is that how old you were at the time?

Yes [CONTINUE]

No [RETURN TO K12 FOR NEW RESPONSE]

[If C10gFLG = "1" and ANSWER to K12 is same as ANSWER from C14 PLUS OR MINUS ONE YEAR go to K12b. Did this start before, after or during your most recent deployment?

- 1 Before
- 2 After
- 3 During
- 8 [VOL] Don't know
- 9 [VOL] Refused

K13. When was the most recent time that you had any of these problems? [READ CHOICES IF NEEDED TO PROBE]

- 1 Within the last week
- 2 Within the last 30 days
- 3 Over a month ago, but within the past 3 months,
- 4 Over 3 months ago, but within the past 6 months,
- 5 Over 6 months ago, but within the past 12 months,
- 6 More than 12 months ago
- 8 [VOL] Don't know
- 9 [VOL] Refused

[ASK ALL]

K14. Since we last spoke, have you ever been diagnosed by a physician or health professional with...

a. Posttraumatic stress disorder (P.T.S.D.)

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

a1. **[If C10g= 'YES' or C10FLG="1"]** Was this before, since or both before and since your most recent deployment?

- 1 BEFORE
- 2 SINCE
- 3 BOTH
- 7 [VOL] During
- 8 [VOL] Don't know
- 9 [VOL] Refused

b. Depression

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

b1. **[If C10g= 'YES' or C10FLG="1"]** Was this before, since or both before and since your most recent deployment?

- 1 BEFORE
- 2 SINCE
- 3 BOTH
- 7 [VOL] During
- 8 [VOL] Don't know
- 9 [VOL] Refused

c. Anxiety Disorder

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

c1. **[If C10g= 'YES' or C10FLG="1"]** Was this before, since or both before and since your most recent deployment?

- 1 BEFORE
- 2 SINCE
- 3 BOTH
- 7 [VOL] During
- 8 [VOL] Don't know

9 [VOL] Refused

c. Traumatic Brain Injury

1 Yes

2 No

8 [VOL] Don't know

9 [VOL] Refused

c1. **[If C10g= 'YES' or C10FLG="1"]** Was this before, since or both before and since your most recent deployment?

1 BEFORE

2 SINCE

3 BOTH

7 [VOL] During

8 [VOL] Don't know

9 [VOL] Refused

W. Risky Health Behaviors

Next, I am now going to ask about driving...

W1. How often do you use seat belts when you drive or ride in a car? Would you say: [READ CHOICES]

1 Always

2 Nearly always

3 Sometimes

4 Seldom

5 Never

6 [VOL] Never ride in a car

8 [VOL] Don't Know

9 [VOL] Refused

IF ANSWER TO W1 IS "NEVER RIDE IN A CAR" THEN SKIP TO W 7

W2. In the past 30 days, how many times have you driven when you've had perhaps too much to drink?

____ Number of times [0-30]

31 31+

98 [VOL] Don't Know

99 [VOL] Refused

M. Cigarette Use

Next, I have a few questions about cigarettes...

M1a. Since we last spoke, did you smoke cigarettes on at least some days?

1 Yes **[ASK M1b]**

2 No **[SKIP TO NEXT SECTION]**

8 [VOL] Don't know **[SKIP TO NEXT SECTION]**

9 [VOL] Refused **[SKIP TO NEXT SECTION]**

M1b. At any point in your life, did you smoke cigarettes everyday?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

M1c. Thinking about just the past 30 days... Out of the past 30 days, how many days did you smoke cigarettes? Your best estimate is fine.

- 1 ___ Days used out of 30 **[0-30]**
- 98 [VOL] Don't Know
- 99 [VOL] Refused

[ASK IF M1c IS 1 OR GREATER]

M1d. In the past 30 days, on those days when you smoked, on average, how many cigarettes did you smoke per day? Your best estimate is fine and a pack = 20.

- 1 ___ Cigarettes per day **[0-60]**
- 61 61 cigarettes or more
- 98 [VOL] Don't Know
- 99 [VOL] Refused

N. Alcohol

The next series of questions is about drinking alcohol beverages like beer, wine or liquor...

N1. Since we last spoke, did you ever drink alcohol?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

[IF "YES", GO TO NEXT QUESTION; OTHERWISE GO TO NEXT SECTION.]

N19. Thinking about just the **past 30 days**, on how many days did you drink any alcoholic beverages? Your best estimate is fine.

- 1 ___ Days used out of 30 **[0-30]**
- 98 [Vol] Don't Know
- 99 [Vol] Refuse

[IF N19 IS 1 DAYS OR GREATER, GO TO N20; OTHERWISE GO TO NEXT SECTION.]

N20. A drink is 1 can or bottle of beer, 1 glass of wine, 1 can or bottle of wine cooler, 1 cocktail, or 1 shot of liquor. On the days when you drank alcohol over the **past 30 days**, on average, how many drinks did you have each day? Your best estimate is fine.

- 1 ___ Drinks per day **[0-19]**
- 20 20 drinks or more
- 98 [VOL] Don't Know

R. Use of Mental Health Services

Now I'm going to ask you about your past use of services that help with problems with emotions or nerves, or problems with the use of alcohol or drugs.

R8g. Since we last spoke in [MONTH] of [YEAR], Did you ever go to see any professionals or self-help groups such as a physician, psychiatrist, psychologist, minister, priest, rabbi or other spiritual advisor, Alcoholics Anonymous or Narcotics Anonymous for problems with your emotions or nerves, or for problems with your use of alcohol or drugs?

- 1 Yes
- 2 No
- 8 [VOL] Don't Know
- 9 [VOL] Refused

[ASK R10b If "YES" TO R8g AND C10g='Yes']

R10b. Were any of these visits related to your most recent deployment?

- 1 Yes
- 2 No
- 8 [VOL] Don't Know
- 9 [VOL] Refused

[ASK R10c If "YES" IN R8g AND R10b="Yes"]

R10c. How soon did you seek help after your most recent deployment? [READ LIST IF NEEDED]

- 1 Within the week after
- 2 Within 30 days
- 3 Over a month, but within 3 months,

- 4 Over 3 months, but within 6 months,
- 5 Over 6 months, but within 12 months,
- 6 More than 12 months after
- 8 [VOL] Don't know
- 9 [VOL] Refused

[ASK R11 if "YES" TO ANY QUESTIONS IN R8]

R11. Were any of these services provided by the military, Tricare and/or the V.A. (Veterans' Administration)
 [NOTE: This includes referrals to other locations which were made and covered by the military, Tricare or V.A.]?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

S. DEMOGRAPHICS

This series of questions is for statistical purposes only, to help us analyze the results of the study.

S2. What is your current marital status? Are you: [PLEASE READ EACH CHOICE EXCEPT FOR "DON'T KNOW" OR REFUSED; **MULTIPLE ANSWERS ALLOWED**]

- 1 Married **[GO TO S3]**
- 2 Divorced
- 3 Separated
- 4 Widowed
- 5 Never been married
- 8 [VOL] Don't know
- 9 [VOL] Refused **[GO TO S3]**

S2a. Are you currently in a committed relationship, dating casually, or not seeing anyone?

- 1 committed relationship
- 2 dating casually
- 3 not seeing anyone
- 4 [VOL] Other [SPEC: _____]
- 8 [VOL] Don't know
- 9 [VOL] Refused

S3. Are you the parent or primary caretaker of any children who are under 18 years of age (whether they live with you or not)?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

IF YES TO S3 go to S3b, OTHERWISE GO TO S4

S3b. How many of these children are living with you currently?

_____ NUMBER
[DO NOT INCLUDE A DON'T KNOW OR REFUSED CODE]

S4. What kind of health care coverage do you currently have to pay for your health care expenses? Are you covered by: [READ LIST AND SELECT ALL THAT APPLY]

1. Your civilian employer's healthcare plan
2. Your spouse or family member's civilian employer's plan
3. Your school's healthcare plan
4. Health insurance coverage you or your family pay for yourself
5. Medicare
6. Medicaid
7. Tri-care
8. Your spouse or family member's Tri-care, active duty or retired military healthcare coverage
9. the Veterans Administration (VA)
- 10 Some other kind of health care coverage [SPECIFY:_____]
- 11 or, do you have no health care insurance?
- 98 [VOL] Don't know
- 99 [VOL] Refused

[S8 REVISED ON 12-14-2009 AFTER 30 PILOT SURVEYS]

S8. What is the highest level of education or schooling you have completed?

[READ CHOICES IF NEEDED]

- 1 Never attended school
- 2 Kindergarten to 8th grade
- 3 Some high school (9th to 11th grade)
- 4 Technical Training (not including military training) but no HS diploma
- 5 High school equivalency (GED/Test-based diploma)
- 6 High school graduate (12th grade)
- 7 Technical Training (not including military training) and HS diploma
- 8 Some college
- 9 College Associates degree (2 year)
- 10 College graduate bachelor's (4-year)
- 11 Masters Degree
- 12 Doctorate
- 13 Other [Spec]
- 98 [VOL] Don't know
- 99 [VOL] Refused

S9. Do you rent your home or own your home? [IF "LIVING WITH FAMILY" PROBE: IS THE HOME YOU LIVE IN OWNED OR RENTED?]

- 1 Rent home
- 2 Own home (includes paying mortgage)
- 3 Neither
- 8 [VOL] Don't know
- 9 [VOL] Refused

S10. And now, what was your total household income last year from all sources before taxes? Include your income and income from anyone else living in your household. Do not tell me the amount. Please just tell me the answer that best represents your household income.

[IF HESITANT: Income data is important in analyzing health information we collect. For example, the information helps us learn whether people in one income group have particular difficulties accessing different services they might need.]

[F NECESSARY] Include income from jobs, investments, public assistance, unemployment insurance, social security, disability and pension funds, and all other sources?

Was it: [READ LETTER AND RANGE]

- 1 A, Less than or equal to \$40,000 [GO TO S10a]
- 2 B, More than \$40,000 to \$80,000 [GO TO S10b]
- 3 C, More than \$80,000 [GO TO S10c]
- 8 [VOL] Don't know [GO TO S13]
- 9 [VOL] Refused [GO TO S13]

[PROBE: Your best estimate is fine.]

S10a. Was that: [READ LETTER AND RANGE]

- 1 A, Less than or equal to \$20,000 or
- 2 B, More than \$20,000
- 8 [VOL] Don't know
- 9 [VOL] Refused

[GO TO S13]

S10b. Was that: [READ LETTER AND RANGE]

- 1 A, Less than or equal to \$60,000, or
- 2 B, More than \$60,000
- 8 [VOL] Don't know
- 9 [VOL] Refused

[GO TO S13]

S10c. Was that: [READ LETTER AND RANGE]

- 1 A, Less than or equal to \$100,000
- 2 B, More than \$100,000 to \$150,000, or
- 3 C, More than \$150,000
- 8 [VOL] Don't know
- 9 [VOL] Refused

S13a. Now I have some questions about your current work situation. For each choice, tell me whether or not it applies to you. **[SELECT ALL THAT APPLY]** Are you...

- 1 Working full-time in a civilian job
- 2 Working part-time in a civilian job
- 3 Working full-time for the Reserve
- 4 Working part time for the Reserve
- 5 Looking for work or unemployed
- 6 Retired
- 7 A homemaker
- 8 A student
- 9 On maternity or paternity leave
- 10 On illness or sick leave
- 11 On disability
- 12 Other (SPECIFY: _____)
- 98 [VOL] Don't know
- 99 [VOL] Refused

ASK S14 IF WORKING FULL TIME (1) OR PART TIME (2) IN A CIVILIAN JOB IN S13a]

S14. As an official part of your civilian job, do you supervise the work of other employees, that is have responsibility for, or tell other employees what to do?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

ASK S14a IF WORKING FULL TIME (3) OR PART TIME (4) FOR RESERVE IN S13a]

S14a. As an official part of your job with the Reserve, do you supervise the work of other employees, that is have responsibility for, or tell other employees what to do?

- 1 Yes
- 2 No
- 8 [VOL] Don't know
- 9 [VOL] Refused

T. Counseling/Conclusion

T1. Thank you for completing the survey. Before I go, I have just a few more things to take care of, including getting some information so that we can send you the check for \$25 that we mentioned at the beginning of the survey. First, I would just like to give you our toll-free number in case you have any additional questions about the project or you need to get in touch with us later on.

T2. Would you like to write our number down? It is 1-888-735-0199.

- 1 Accepts number
- 2 Does not want the number

T2a. And, if you have any questions regarding your rights as a research participant, you may call the Columbia University Institutional Review Board. Would you like to write the number down? That number is 212-305-5883.

- 1 Accepts number
- 2 Does not want the number

T3. Now, I just need to verify your name and address so that we can send you your check. [INTERVIEWER: IF RESPONDENT ASKS YOU TO SEND THE MONEY TO A CHARITY, SAY: That is a good idea, but the study protocol requires that I send the check to the person who completes the survey. Then, of course, you can send it along to whatever charity you prefer.]

- 1 Will give address/accept check **[GO TO ADDRESS MODULE]**
- 2 Decline address/decline check

[IF DECLINE CHECK]

T4. Then just let me verify your address. Having this information will make it easier to contact you in about a year to conduct the next follow-up interview or to send you information on the other parts of the study.

- 1 Will give address **[GO TO ADDRESS MODULE]**
- 2 Decline address

[ASK ALL]

T5. Email is a good way for us to keep in touch and inform you about our next upcoming survey. Do you have an email address?

YES, WILL GIVE EMAIL **[CAPTURE EMAIL ADDRESS]**
NO – DO NOT HAVE EMAIL
REFUSED TO GIVE EMAIL

T6. Having contact information for someone who always knows how to get in touch with you will also make it easier for us to keep in touch and inform you about our next upcoming survey. Is there someone who always knows how to get in touch with you?

Yes, will give information **[ask for first & last name & phone]**
No, no contacts **[SKIP TO T8]**
Refused **[SKIP TO T8]**

T7. Is there a second person who always knows how to get in touch with you?

Yes, will give information **[ask for first & last name & phone]**
No, no contacts **[SKIP TO T8]**
Refused **[SKIP TO T8]**

Okay, we're almost done. I have just one more thing to take care of before I go.

T8. Some of the questions in this survey can be upsetting or stressful. Were any of the survey questions emotionally upsetting to you?

- 1 Yes **[ASK T9]**
- 2 No **[GO TO T10a]**

T9. Are you still feeling emotionally upset or are you okay now?

- 1 Still upset **[ASK T10]**
- 2 Feeling okay now **[GO TO T10a]**

T10. If you would like to talk to someone about how you are feeling, I can have someone call you. Would you like our on call counselor to call you?

- 1 Yes **[GO TO T11]**
- 2 No **[GO TO T10a]**

[IF K9c= "YES," READ T10a and ASK T10a – ELSE SKIP TO T16]

T10a. Earlier in the survey you mentioned having thoughts within the past 30 days that you would be better off dead or of hurting yourself in some way. If you would like to talk to someone about these thoughts, I can have someone call you. Would you like our on call counselor to call you?

- 1 Yes **[GO TO T11]**
- 2 No **[GO TO T16]**

T11. Do you need a counselor to get back to you (today/this evening) or can I have someone call you (tomorrow/Monday) during regular business hours?

- 1 Need someone to call today/tonight
- 2 Would like someone to call tomorrow/Monday

T12. What is your name?

T12fn. RECORD first name

T12ln. RECORD last name

T12ph. What number should we call you back on?

T12st. And, where do you live? I need to provide the counselor with your name, address, and telephone number to be sure we are able to reach you. This information will only be used by the counselor to contact you.

RECORD street name and number

T12town. RECORD town

T12state. RECORD state

T12zip. RECORD zip code

T12co. RECORD any interviewer comments

Okay, I will have someone get back to you soon.

[NOTE TO INTERVIEWER: IF RESPONDENT WANTS TO TALK TO A DOCTOR TODAY/TOMORROW/MONDAY, NOTIFY YOUR SUPERVISOR NOW!]

[CATI – DISPLAY A NOTIFICATION SCREEN TO PROMPT SUPERVISOR FOR ANY COUNSELING REQUESTS]

T16. As a final note, we want to remind you that we will be calling again to follow-up on how you are doing about once a year. If you change your telephone number or address in the meantime, you can let us know about it by calling the toll free number I provided earlier. This information will be provided in the envelope with your check.

[RECORD CODE 2 ONLY IF PERSON SAYS NOT TO CALL AGAIN]

1 Continue

2 [VOL] Does not want to be called again

Thank you for your participation in this survey. Have a great day/evening.

CELL PHONE PROTOCOL

Some respondents will supply a phone number in response to the advance letters and they may turn out to be cell phones.

Update phone number needs to be available on the tipresp menu, and updating needs to be enabled in the script where indicated in the following questions.

[CATI: ADD THESE QUESTIONS TO THE SCRIPT IMMEDIATELY AFTER THE RESPONDENT INTRODUCTION]

P1. Is this number that I called you on a cell phone?

(If asked why: I just want to offer to call you on a land-line phone, or at a time when you are not driving if this is a cell phone)

Yes (GO TO P2)

No (SKIP TO A)

REFUSAL - SOFT (SOFT REFUSAL - THANK & END)

REFUSAL - HARD (HARD REFUSAL - THANK & END)

P2. Is there a land line where you would prefer me to call to conduct the interview?

Yes (UPDATE PHONE TO LAND LINE & SCHEDULE CB)

No, continue on cell phone

REFUSAL – SOFT (SOFT REFUSAL - THANK & END)

REFUSAL - HARD (HARD REFUSAL - THANK & END)

P3. Are you currently driving, or someplace else where it IS NOT safe to talk on your cell phone?

YES/CALL ME LATER (SCHEDULE CALLBACK)

No, respondent can talk now

REFUSAL – SOFT (SOFT REFUSAL - THANK & END)

REFUSAL - HARD (HARD REFUSAL - THANK & END)

P4. Is now a good time to talk?

(INTERVIEWER: IF EVENINGS / WEEKENDS ARE BETTER BECAUSE RESPONDENT IS NOT CHARGED FOR CELL USAGE, SCHEDULE CALLBACK AND RECORD COMMENTS)

Yes, now is fine (CONTINUE TO A1a)

No, another time is better (SCHEDULE CALLBACK & record comments about best call times)

REFUSAL – SOFT (SOFT REFUSAL - THANK & END)

REFUSAL - HARD (HARD REFUSAL - THANK & END)